

**FINAL REPORT OF THE
SECRETARY OF HEALTH AND HUMAN RESOURCES,
SECRETARY OF PUBLIC SAFETY AND THE SECRETARY
OF EDUCATION ON**

**EVALUATION OF THE
COMPREHENSIVE SERVICES ACT**

**TO THE GOVERNOR AND
THE GENERAL ASSEMBLY OF VIRGINIA**



HOUSE DOCUMENT NO. 50

**COMMONWEALTH OF VIRGINIA
RICHMOND
1995**



COMMONWEALTH of VIRGINIA

Office of the Governor

George Allen
Governor

Kay Coles James
Secretary of Health and Human Resources

February 8, 1995

TO: The Honorable George Allen

and

The General Assembly of Virginia

The report contained herein is pursuant to House Joint Resolution 56, agreed to by the 1994 General Assembly.

This report constitutes the response of the Secretary of Health and Human Resources, the Secretary of Public Safety and the Secretary of Education to the request to study and evaluate the effectiveness and efficiency of and the adequacy of state funding for the Comprehensive Services Act.

Respectfully Submitted,

Handwritten signature of Kay Coles James in black ink, written over a horizontal line.

Kay Coles James
Secretary of Health and Human Resources

Handwritten signature of Jerry W. Kilgore in black ink, written over a horizontal line.

Jerry W. Kilgore
Secretary of Public Safety

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Beverly H. Sgro
Secretary of Education

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NOVEMBER 15, 1994**

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PREFACE

FINAL REPORT
NOVEMBER 15, 1994

HOUSE JOINT RESOLUTION NO. 56 EVALUATION OF THE COMPREHENSIVE SERVICES ACT

The following report is submitted in response to House Joint Resolution No. 56 of the 1994 Virginia legislative session. The Resolution requires the Secretaries of Health and Human Resources, Public Safety, and Education "to study and evaluate the effectiveness and efficiency of and the adequacy of state funding for the Comprehensive Services Act."

The conclusions and recommendations contained herein are based on the experiences of Virginia's counties and cities during the first year of implementation of the Comprehensive Services Act (CSA). Therefore, perceptions are limited to the brief history of the CSA. It is apparent that in order to plan wisely for the future needs of the Commonwealth's at-risk youth and their families, valid approaches to forecasting service demands and costs are of paramount importance. Without such projections, we enter the second and future years of CSA operation with scant knowledge of their fiscal impact.

Localities across the state have worked hard over the past year to put the CSA into operation. They have experienced varying degrees of satisfaction and frustration with converting the noble intentions of the Act into day-to-day realities. On one point they agree: implementing the CSA has been a costly endeavor, in terms of staff time, administrative support and actual expenses. It is important to hear the concerns of local staff and work with them to alleviate the burdens they may be experiencing.

It would be premature to conjecture whether the outcomes of the CSA justify the costs incurred. Other studies this year indicate that those involved in the CSA vary in their opinions about its accomplishments. Most believe the Act is meeting its goals of stronger interagency collaboration and family participation. They are about evenly split with regard to whether the Act has thus far had a significant positive impact on the youth it reaches.

One of the primary aims of the CSA is to build up a network of community-based services in the state. The intention is to provide less restrictive, less expensive alternatives to residential care. For example, information presented in this study indicates that private residential care for the "mandated" population served by the CSA has an annual cost (\$17,825) which is almost ten times as expensive as non-residential, public care (\$1,809).

Accomplishing the goal of increasing community-based care will require reviewing the screening/decision-making process whereby youths are placed in residential settings to assure that out-of-home placements are used only when less costly alternatives are inappropriate. In addition, increasing community-based care may require new or redirected funding for program startup.

It is apparent that significant strides have been taken locally to coordinate services for at-risk youth and families. An impressive degree of interagency coordination has been accomplished since the CSA came into effect. Still, the effort to better integrate screening and planning processes continues, so that citizens may experience a "seamless" process of seeking and accessing appropriate services.

The future success of the CSA will require that several issues be effectively addressed. First, concerns that the CSA represents a partially funded mandate requiring extensive local resources for administration must be resolved. Second, accurate projections of the future demand for CSA services and the cost of these services are required to effectively plan the continued development of an efficient and cost-effective system of services. Included in these projections should be local administrative costs and the demand/need for residential care, both of which should be continually monitored. Finally, a statewide information system that provides accurate and timely data describing the youth served through the CSA, the services they receive and the outcomes of these services must be established. Such data are necessary if we are to effectively manage the delivery of CSA services.

These observations and those described further in this report caution us to move forward with the CSA in a deliberate manner. Continuous vigilance and assessment are essential to ensure reasonable achievements for those who are directly responsible for the CSA's implementation.

EXECUTIVE SUMMARY

FINAL REPORT
NOVEMBER 15, 1994

HOUSE JOINT RESOLUTION NO. 56 **EVALUATION OF THE COMPREHENSIVE SERVICES ACT**

This report is submitted in response to House Joint Resolution No. 56 of the 1994 Virginia legislative session. The Resolution requires the Secretaries of Health and Human Resources, Public Safety, and Education "to study and evaluate the effectiveness and efficiency of and the adequacy of state funding for the Comprehensive Services Act." The conclusions and recommendations contained herein are based on the experiences of Virginia's counties and cities during the first year of implementation (July 1, 1993 - June 30, 1994) of the Comprehensive Services Act (CSA).

This study addresses three major objectives. Each is presented here, along with a summation of related conclusions and recommendations.

Objective 1. To provide preliminary data on local administrative costs of implementing the CSA during fiscal year 1994.

Many local agency staff persons experience a significant increase in their workload due to the interagency collaborative style introduced through the CSA.

Recommendations:

1. Continue funding of CSA administrative costs at least two years beyond the current biennium, for a total of the first five years of CSA operation.
2. Conduct a special audit of a sample of rural and urban areas to ascertain the actual costs (in both dollars and human resources) of implementing the CSA.
3. Provide technical assistance to localities which express an interest in joint ventures with neighboring localities to aid with CSA administration.
4. Conduct workshops for localities on alternative strategies for addressing CSA administrative needs without using additional state or local funds.

Many local staff testify that CSA administrative funds are inadequate to cover actual costs.

Recommendations:

5. Investigate the feasibility of providing a minimum CSA administration allocation which is greater than the current minimum of \$5,000, and/or reducing the local administrative burden.
6. Distribute the funds which some localities do not request to those localities which demonstrate a need for supplemental administrative resources.
7. Establish an "initiative fund" to which localities could apply for innovative, cost-efficient approaches to services administration.

Regardless of implementation issues, the "bottom line" for many involved with the CSA is whether the Act is creating a better system to serve at-risk children and their families.

Recommendation:

8. Focus future evaluation efforts on quality of services, client outcomes, customer satisfaction and cost efficiencies.

Objective 2. To provide preliminary data on the adequacy of CSA pooled service funds for fiscal year 1994.

A major concern expressed at all levels and across the state is that "non-mandated" youth do not receive the services they need.

Recommendations:

9. Explore alternative methods to assure equal access to services by all youth eligible for CSA inclusion, and project attendant costs to the state and localities.
10. Reassess the state funding formula for the CSA in light of one year's experience.
11. Establish a group of experts in the area of "creative funding" to provide technical assistance to others.
12. As recommended by the "CSA Forecasting Task Force," the Department of Planning and Budget should proceed to establish a technical forecasting work group to project the future demand for CSA services and their associated costs.

There are concerns voiced that charges for services by private providers have significantly increased since de-regulation. There is little "hard" evidence to deny or substantiate this claim.

Recommendation:

13. Request the Department of Planning and Budget to repeat its study of private provider fees, now that the CSA has been operational for over one year.

Objective 3. To examine the interrelatedness of various planning processes (i.e., IFSP, IEP, FCSP) for services to mandated children.

There is a loud and clear message from across the Commonwealth that the greatest accomplishment to date of the CSA has been the initiation in some cases, and the enhancement in most cases, of interagency collaboration.

Recommendations:

14. Recognize local CSA participants for the herculean efforts they exerted to make the CSA a reality during the past year.
15. At the appropriate time, publicize the CSA nationwide.

It appears from the findings of this study that only a small minority of FAPTs continue to experience conflict among the IFSP, IEP and FCSP planning processes.

Recommendations:

16. Determine which FAPTs may be experiencing difficulties in handling the various child planning processes. Arrange for technical assistance from other FAPTs when requested.
17. Encourage FAPTs to cross train their members in the various types of child service plans.
18. Repeat the IEP/IFSP article which appeared in the March 1994 issue of *Comprehensive Services for Youth and Families NEWS*.

There is a wide variation in the degree to which localities have successfully implemented the CSA. Certain jurisdictions may adhere to the philosophy and intentions underlying the Act, but are frustrated by difficulties in developing procedures and practices to assure its smooth operation.

Recommendation:

19. Enhance technical assistance and increase its availability to localities.

CSA and the Governor's Commission on Government Reform

There are a number of principles delineated by the Health and Human Resources Committee of the Governor's Blue Ribbon Strike Force which are consistent with those of the CSA.

Consolidating similar or duplicative programs and services.

A major aim of the CSA's interagency approach to services is to eliminate duplication of application and planning processes for at-risk youth and families, and to consolidate overlapping services.

Encouraging "one-stop shopping" to improve services to the public.

The creation of FAPTs under the CSA has provided a single, multi-agency point of contact for parents of at-risk youth.

Co-locating offices, cross-training staff, and establishing a vehicle to require interagency cooperation.

The establishment of CPMTs and FAPTs under the CSA has decidedly enhanced interagency collaboration. Cross-training of staff has been a "bonus" outcome.

Requiring agencies to find innovative approaches to service delivery to promote efficiency and reduce costs.

One of the principal goals of the CSA is to promote the development of new community-based services for at-risk youth and their families.

Reducing reliance on general fund support by establishing public/private partnerships.

The establishment of public/private partnerships is an expressed goal of the CSA.

Using computer technology to simplify paperwork, improve intra- and interagency communications, reduce costs and reduce time required for agencies to respond to the needs of clients.

There is an intention for the CSA to be supported by a statewide, interagency MIS. The CSA MIS has been delayed due to its cost, but the idea has not been abandoned.

FINAL REPORT
NOVEMBER 15, 1994

HOUSE JOINT RESOLUTION NO. 56
EVALUATION OF THE COMPREHENSIVE SERVICES ACT

OFFICE OF RESEARCH AND EVALUATION, DMHMRSAS

BACKGROUND

In order to assure that this study meets the express intentions of House Joint Resolution No. 56 (see Appendix A), interviews were conducted with several constituents of the chief patron of the resolution to determine the underlying issues. Discussions with these individuals revealed a number of specific concerns with the Comprehensive Services Act (CSA). These included:

- The necessity of hiring full-time coordinators to attend to CSA activities.
- Insufficient funds to serve non-mandated children.
- Duplicative processes in planning services for individual youths and their families.

One of the school administrators interviewed recommended that special education funds be removed from the CSA state pool of service funds, in order for staff to work more efficiently; that is, with less duplication.

Discussions with additional agency administrators involved in the CSA revealed other concerns, including:

- Strained relationships between some school boards and other CSA participants.
- A perception that there are now (post-CSA implementation) fewer funds available to serve special education students.
- Increased administrative costs, particularly for new staff, yet insufficient allocation of administrative funds.

These findings were considered in the context of additional information available through the

overall CSA evaluation, as mandated by the Appropriation Acts of 1993 and 1994. This review resulted in the identification of three major objectives to be achieved by the present study. These objectives are:

To provide preliminary data on local administrative costs of implementing the CSA during fiscal year 1994.

To provide preliminary data on the adequacy of CSA pooled service funds for fiscal year 1994.

To examine the interrelatedness of various planning processes (i.e., IFSP, IEP, FCSP) for services to mandated children.

The work plan for this study was developed and presented to the Secretary of Health and Human Resources in June 1994 (see Appendix H). Data collection unique to this study was conducted in July and August, with information continuing to arrive during early November. Time for data analyses and interpretation was brief.

For each study objective, a triangulated approach to data collection was employed. That is, several methodologies were utilized to obtain both quantitative and qualitative information from a variety of sources. Each methodology is explained below.

LIMITATIONS OF THIS STUDY

This study attempts to explore several components of an experimental, far-reaching piece of legislation -- the CSA. Virginia is the first state in the nation to initiate on a statewide level an approach to meeting children's needs which revolutionizes the way in which at-risk youth and their families are identified and served. Moreover, this study has been formulated and conducted in an unusually brief period of time. Therefore, certain limitations exist.

1. *Too soon to judge.* Major shifts in program direction are expected to be accompanied by "start-up costs." For example, it is burdensome for staff to develop and adopt new operating procedures. Staff often are required to take special training and participate in orientation sessions. They must forge new relationships with other agencies and participants. These activities are time consuming.

Those involved in implementing the CSA often report increased workloads and uncertainty in decision-making. However, findings of other studies suggest that the intensity of these experiences may subside over the next few years.

2. *No baseline data.* We do not know what workloads and work schedules were like before July 1, 1993. Therefore, we are unable to make "before-and-after" comparisons regarding the demands of the CSA process. Moreover, it is critical to know, for those

whose workloads have increased, whether they are now "neglecting" former tasks that are critical to the families served.

3. *No outcome measures.* With regard to outcomes, it is too early in the program to expect significant changes in the lives of CSA children and their families. Therefore, even if the CSA is viewed as more "resource intensive" than previous service systems, we are unable to answer the critical question: "Is it worth the extra effort?" Processes for collecting outcome information are currently being developed. The first reports are scheduled for fall 1995.
4. *No in-depth cost measures.* Whether staff put in more hours or less hours as a result of the CSA, it is helpful to attach dollar amounts to those hours. To do this would require significant research given that the CSA operates across the Commonwealth, and involves all levels of staff in both the public and private sectors.

To gather reliable information about the time demands of the CSA would require a year-long study, in order to account for seasonal fluctuations. For example, special education service planning is rather inactive during the summer months.

5. *No consumer perspective.* This study relies primarily on information provided by professionals involved in implementing the CSA. There is little input from the children and families whose lives are affected. To truly learn the degree to which the CSA is accomplishing its mission, "case studies" of actual families are needed. These studies should consist of direct observations, in-depth interviews and responses to written questions, all of which take place at intervals over a considerable period of time.

The CSA evaluation staff is currently negotiating to have case studies included in the overall CSA evaluation effort. The earliest possible results will be available in January 1996.

RESULTS

Objective # 1: To provide preliminary data on local administrative costs of implementing the CSA during fiscal year 1994.

Approach A: Review findings of the CSA implementation survey.

As part of the general CSA evaluation plan, a mailed survey was conducted in April 1994 to assess the implementation of the Act during its first nine months of operation. A questionnaire was sent to all members of the 116 CPMTs, and to members of 24 selected FAPTs. A total of 1,090 questionnaires were mailed. The overall response rate to the survey was 49%, and the response rate for team chairpersons was 62%. Following are questions and results from the survey which relate to Objective # 1 of the current study.

Question 1: Have the "CSA administrative funds" provided to your CPMT been sufficient to cover new administrative costs associated with the CSA?

This question was addressed only to the CPMT chairpersons. Seventy percent (70%) of the respondents reported that there were not sufficient administrative funds provided to their CPMT to cover new administrative costs associated with the CSA.

Question 2: In your locality have one or more positions been established specifically to implement the CSA? If a position was established, how is it funded?

Results from the survey indicate that at least 24 (21%) of the 116 CPMTs in Virginia have one or more positions, full-time or part-time, assigned to CSA responsibilities. (There may be additional localities with such positions who did not respond to the survey.) Half of the localities who indicated having a CSA position are urban.

Narrative responses to the second query indicate that in eight cases the newly established position was at least partially funded with CSA administrative allocations from the state. Typically these funds were supplemented with local dollars. In a few instances several localities pooled their CSA administrative funds to hire a coordinator to work with multiple CPMTs.

Question 3: What accommodations have been made to formally recognize your duties and responsibilities with the CSA?

Two of the five possible choices for this question involve more responsibilities with no change in existing duties. Seventy percent (70%) of CPMT respondents selected one of these two choices. Only two percent (2%) of respondents selected a choice reflecting alteration of existing job responsibilities to accommodate changes brought on by the CSA.

Question 4: How many total hours per week on average would you estimate you spend on CSA administrative tasks or duties? (Do not include direct or indirect client contact time.)

Forty-nine percent (49%) of respondents reported spending 0-2 hrs/week on CSA administrative tasks or duties; 38% reported spending 2 to 5.5 hrs/week. Fourteen percent (14%) reported spending 5.5 to 15 hrs/week on CSA tasks and duties. When data are examined separately for the team chairpersons it is found that 33% of this group reported spending between 5.5 and 15 hours per week on their CSA responsibilities.

Approach B: Examine state records of allocations for CSA administration.

The Virginia Department of Education serves as the state's fiscal agent for the CSA. Their records indicate figures for "state share" and "local match" of CSA administrative costs for FY 94.

TABLE 1: CSA FY 94 ADMINISTRATIVE ALLOCATIONS			
Localities	State Share	Local Match	TOTAL
<i>Counties</i>	\$350,506	\$186,624	\$537,130
<i>Cities</i>	246,514	111,037	357,551
TOTAL	\$597,020	\$297,661	\$894,681

For the purposes of local CSA accounting, there are 132 fiscal entities in Virginia, 95 counties and 37 cities. All of these fiscal entities were entitled to apply for state-allocated CSA administrative funds. Nine (9) counties and five (5) cities declined to request these funds. The figures in Table 1 are based on allocations to the 118 localities which requested administrative funds.

The state fiscal agent for the CSA developed a formula to determine the amount of state allocation for each locality that applied for CSA administrative funds. The minimum total allowance (state share plus local match) was \$5,000. The maximum amount was \$25,000. Of the 86 counties which received funds, 76 were allocated \$5,000, five received over \$20,000, and the rest averaged about \$8,000. Of the 32 cities which received funds, 16 were allocated \$5,000, nine received over \$20,000, one received almost \$18,000, and the rest averaged about \$7,400.

Approach C: Ascertain local experience with adequacy and expenditure of CSA administrative funds for FY 94.

The Department of Education does not require localities to report their expenditures of CSA administrative funds. In order to determine local experiences with these funds, a special survey was developed and distributed to the 132 CSA fiscal agents statewide (see Appendix B.) The August survey yielded 74 completed questionnaires for a response rate of 56%. Of the 74 respondents, three localities had neither requested nor received CSA administrative funds.

TABLE 2: FY 94 CSA ADMINISTRATIVE EXPENDITURES ¹	
Source of Funds	Amount
State Share	\$374,797
Local Match	173,467
Additional Local Funds ²	350,042
Total Budget	\$898,306
Total Actual	789,820
Variance	\$108,486

¹ Based on reports submitted by 74 of 132 localities.

² Based on ten localities which reported "new" costs.

Two additional localities reported "redirected" costs.

Ten (14%) of the respondents reported spending more local funds than originally allocated. These funds are described as "new" or cash costs. The additional local allocations by seven cities ranged from \$5,066 to \$205,450. The average was \$45,792. The additional allocations by three counties ranged from approximately \$8,000 to \$10,000. The average was \$9,833.

Two additional respondents accounted for all their "redirected" (as opposed to "new") and in-kind costs incurred due to CSA administration. These localities attempted to account for much of the time local staff devoted to implementing the CSA during its first year of operation. One rural county reported \$40,000 of expenses for local administrative and fiscal services provided on behalf of the CSA in FY 94. One urban, multijurisdictional area reported \$1.3 million in redirected costs (see Appendix C). Also, one locality stated that it will have a special audit performed, available in spring 1995, to track all costs associated with the CSA.

For those localities reporting CSA administrative expenditures, the funds were used in the following manner:

- ▶ 87% -- personnel
- ▶ 7% -- non-personnel, non-equipment
- ▶ 5% -- equipment
- ▶ 1% -- direct services to eligible children and families

As seen in Table 2, there were less administrative funds utilized for the CSA in FY 94 than were available. In some cases this may reflect an inability or unwillingness on the part of local governments to provide the necessary local match of funds. There are other cases where localities held FY 94 allocations, and combined them with FY 95 funds, in order to have enough capital to hire staff needed for CSA-related tasks.

It is critical that the figures presented in Table 2 be viewed in light of comments provided by those responding to the survey. It is equally important to note that these comments represent the views of 32 (43%) of the 74 respondents who chose to provide additional remarks. They are not taken from a random sample of the fiscal agents, nor were they elicited in a standardized manner. Therefore, the following statements are anecdotal in nature and do not necessarily represent a majority opinion.

Adequacy of the initial allocation to administer the CSA is questioned.

The \$5,000 sum which most localities received was often viewed as unrealistically low. Localities expressed the belief that both state and local officials mistakenly assumed that whatever administrative costs were incurred, they would be absorbed by the regular local services administration allocation.

Localities coped with the shortage of administrative funding in a number of ways. In many localities all agencies shared responsibility for administrative tasks, though inefficiently and sometimes reluctantly. One area reported that several localities pooled their allocations and with additional contributions from several counties, covered administrative costs. Several localities noted that they were planning to carry over the remaining money from the FY 94 administrative cost allocation to the next fiscal year. (There appears to be some confusion at the local level as to whether this practice is sanctioned by the state.)

An administrator in one multijurisdictional locality offered this advice to state officials: "Since this coordination of child, parents, service providers and community representatives is essential to the success of a program that the state seems bound and determined to make a local program, you should be willing to share in the total administrative cost of the program to the same extent that you share in the funding of the children for whom services are provided."

Figures provided do not give a complete picture.

Most of the respondents to the survey who made additional comments pointed out that the CSA administrative cost figures they listed on the questionnaire do not tell the whole story. The respondents stated emphatically that many kinds of support were provided by local agencies, but these costs do not appear as charges to the CSA. For example, in one locality a CSA coordinator was hired by the CSB, a special education liaison to the FAPTs was provided by the local School Board, and a fiscal officer and fiscal staff were provided by Social Services. In another area, it was reported that the local Social Services director, her secretary and one fiscal administrator each spent 25% of their time on CSA matters during the first year of operation. None of these costs were charged to the CSA administrative funds. Other "hidden" costs reported included clerical services and general supplies.

Coordinator is greatest need.

Repeatedly respondents to the survey cited the necessity for a "CSA Coordinator" in their locality. Areas with large numbers of CSA families indicated a pressing need for a full-time position, while smaller localities could accomplish their CSA-related tasks with a part-time coordinator. As reported above, at least 21% of CPMTs found a way to establish a CSA position during the first year of operation. A number of these localities utilized demonstration or Trust Fund grant money to fund a position. Others took advantage of state support they received as "intensive" evaluation sites. Nevertheless, the major portion of CPMTs appear to still be without both sufficient staff to adequately support the CSA and funds to acquire such staff.

Approach D: Gather information from intensive evaluation sites.

There are ten CPMTs in Virginia which are designated as "intensive" sites for the overall CSA evaluation. These localities were selected from a larger pool of volunteers, to represent a cross-section of the Commonwealth. They represent a mix of characteristics, including wealth/poverty, urban/rural/suburban, racial/cultural mixes, and different population densities. Both single and multiple jurisdictions/CPMTs are represented.

One major role of the intensive evaluation sites has been to serve as a sample of the state's CPMTs and FAPTs. Since there are 116 CPMTs and approximately 180 FAPTs in Virginia, with a combined membership of over 2,400, it is impractical to reach them all to obtain information needed for evaluation purposes. When highly specific information is required, especially in a short period of time, as in the case of the present study, representatives of the intensive evaluation sites are mobilized. A focus group session was held with representatives of the intensive sites in July 1994 to address the issues identified in HJR 56.

With regard to CSA administrative costs, representatives of the intensive evaluation sites provided the following details.

- Administrative dollars are used for a variety of needs, including: supplementing current staff; computers and related equipment; training for CPMT and FAPT members; and transportation for parents to attend FAPT meetings.
- There is a general sense that the CSA is a financial burden for localities. Reasons cited for this include: local match money is difficult to obtain; there was initial confusion over how the CSA administrative money could be spent; and the fiscal inability to hire additional staff places tremendous burden to carry-out CSA responsibilities on existing staff.

- There is the recognition that although the CSA may cost more during the initial phase of implementation, money will be saved in the long run. One CPMT chairperson commented: "The mistake we make in human services is that we don't follow the planning strategies of private industry. When change-overs are made in the private sector, there is always money set aside for the transition from the old way of operating to the new. This was not the case with the CSA."

Objective # 2: *To provide preliminary data on the adequacy of CSA pooled service funds for fiscal year 1994.*

Approach A: Review testimony provided during the 1994 legislative session.

Materials from the 1994 legislative session relevant to CSA funding issues were requested from the staffs of the Senate Finance Committee and the House Appropriations Committee. A review of these materials revealed no documentation of direct testimony related to CSA funding. However, staff recall a number of concerns brought to their attention, especially around the issue of inadequacy of funds for "non-mandated" children. These are children who are targeted and eligible for CSA services, but for whom there are no federal, state or local statutory requirements that services be provided. The comments recounted by legislative staff echo reports provided below. Consideration of the concerns led the General Assembly to allocate an additional \$2 million earmarked for non-mandated children for the 95-96 biennium.

Approach B: Review findings of the CSA implementation survey.

Question 1: Is there a percentage of the local CSA budget designated exclusively for "non-mandated" youth?

Sixty percent (60%) of CPMT chair respondents indicated that there were local CSA funds designated exclusively for non-mandated youth during FY 94; the remaining 40% reported that no such funds were designated in their communities.

Question 2: Is there a percentage of the local CSA budget designated exclusively for prevention services?

Eighty percent (80%) of CPMT chair respondents reported that there were no CSA dollars designated exclusively for prevention services during FY 94; the remaining 20% reported that there were funds set aside for prevention services.

Interestingly, this issue was raised by several respondents to the CSA administrative cost survey reported above. They expressed concern that the lack of coordinating staff

resulted in the neglect of long-range planning for children's services, especially in the area of prevention.

Question 3: Since the implementation of the CSA on July 1, 1993, the fees (cost per unit of services) charged for services for at-risk youth and their families provided by private agencies in this community have:

- | | |
|----------------------------|--|
| a. decreased more than 25% | b. decreased more than 10% but not more than 25% |
| c. stayed about the same | d. increased more than 10% but not more than 25% |
| e. increased more than 25% | f. Don't know. |

This question was asked of the CPMT chairpersons. Thirty-two percent (32%) of them reported that fees have stayed the same; 38% reported an increase; 27% said they didn't know.

While the issue of private provider service fees is not a major focus of this study, in some cases the perception of fee increases has prompted CSA participants to claim that their pooled funds are inadequate to meet local demands. The Department of Planning and Budget studied private service provider fees in September 1993. Further study may help to demonstrate whether or not current popular perceptions are accurate.

Approach C: Review issues raised during the CSA Forums.

During the closing months of 1993, five CSA Regional Forums were conducted around the state. The Forums were open to all CSA participants -- local and state representatives of parents, public agencies, private agencies, and others. The Forums were well attended and they provided an opportunity for participants to ask questions, voice concerns and share solutions to problems they had encountered in implementing the CSA. Major issues were identified and recorded. Records of the proceedings were reviewed to identify issues relevant to this study. Following is a summary of the comments related to the adequacy of state pool funds.

During the CSA Regional Forums the issue was raised of inadequate funds for serving non-mandated children. Some approaches to resolving the issue were also voiced. There was a general recognition that localities must develop creative approaches to supplementing available funds. These included accessing local grants, Trust Funds, third party payments, foundations and Medicaid dollars.

There were requests by local Forum participants that state staff review and modify the funding formula for localities. Several problems with the formula were identified.

It was suggested by local staff that they use community needs assessments to identify gaps in services, duplication in services and priorities of service needs. It was also suggested that in each case, the selection of the "best" services should be weighed against the impact their use would have on the pool of funds available to other children. Finally, some localities have found it helpful to create a small, quickly accessible fund for appropriate emergency use.

Approach D: Examine available CSA financial records.

The Department of Education (DOE) provided FY 94 allocation and expenditure figures for services to mandated and non-mandated populations. DOE also provided records of supplemental requests by localities for pool funds. These data are presented in Tables 3 and 4, below.

A review of Table 3 shows that a total of \$98,576,426 were spent on CSA services in FY 94. Table 4 indicates that 61% of that amount came from state allocations and the remaining 39% was provided by local funds. Of the total amount expended, \$20,223,004 (20.5%) were supplemental; that is, they were appropriated at the request of localities which found that their initial allocation was insufficient to meet the service needs of their at-risk population.

Table 3 separates expenditures according to the type of youth served. Most (90%) of the funds were expended on services for "mandated" youth. The youth for whom access to funds and services are mandated include the following:

1. Children placed for purposes of special education in approved private school educational programs, previously funded by the Department of Education through private tuition assistance. (This includes both private day and private residential programs.)
2. Handicapped children placed by local social services agencies or the Department of Youth and Family Services in private residential facilities or across jurisdictional lines in private, special education day schools, if the individualized education program indicates such school is the appropriate placement while living in foster homes or child-caring facilities, previously funded by the Department of Education through the Interagency Assistance Fund for Non-educational Placements of Handicapped Children.

TABLE 3: NET TOTAL CSA EXPENDITURES -- FY 94 ¹

Service Category	Amount
MANDATED YOUTH	
Residential Public	\$ 3,894,468
Residential Private	68,217,042
Non-Residential Public	819,609
Non-Residential Private	15,932,929
MANDATED TOTAL	88,864,048 (90%)
NON-MANDATED YOUTH	
Residential Public	380,886
Residential Private	7,550,018
Non-Residential Public	105,988
Non-Residential Private	1,675,486
NON-MANDATED TOTAL	9,712,378 (10%)
ALL YOUTH	
Residential Total	80,042,414
Non-Residential Total	18,534,012
Public Total	5,200,951
Private Total	93,951,475
STATEWIDE TOTAL	\$ 98,576,426

¹ Based on data available through November 4, 1994.

TABLE 4: SOURCE OF CSA EXPENDITURES -- FY 94 ¹

Source of Payments	Amount
ALL EXPENDITURES	
State Share	\$ 60,467,456 (61%)
Local Match	38,108,970 (39%)
STATEWIDE TOTAL	98,576,426
SUPPLEMENTAL EXPENDITURES	
State Supplement	12,864,477 (64%)
Local Supplement	7,358,527 (36%)
TOTAL SUPPLEMENTAL	\$ 20,223,004

¹ Based on data available through November 4, 1994.

3. Children for whom foster care services, as defined by Section 63.1-55.3, Code of Virginia, are being provided to prevent foster care placements, and children entrusted to local social service agencies by their parents or guardians or committed to the agencies by any court of competent jurisdiction for purposes of placement in suitable family homes, child-caring institutions, residential facilities or independent living arrangements, as authorized by Section 63.1-56.

"Non-mandated" youth are those placed by a juvenile and domestic relations district court, in accordance with the provisions of Section 16.1-286, in a private or locally operated public facility or nonresidential program. Also included are those committed to the Department of Youth and Family Services and placed by it in a private home or in a public or private facility, in accordance with Section 66-14. Within the non-mandated population is a sub-category of youth who are also determined to be eligible for CSA participation, but who were not previously served by the funding streams in the state pool. These youth are generally referred to as "other eligible."

Figures in Table 3 are also sorted according to service categories. "Residential" services refer to purchased residential care. All services provided to children while they are placed outside their homes are considered residential. "Non-residential" services are all services provided to

children who are not receiving purchased residential care.

"Public" providers include programs and facilities operated by any county, city or state government or their affiliate agencies. Examples include state mental health facilities and local health department programs. "Private" providers include those programs, homes and facilities not operated by county, city or state governments or their affiliates.

For both the mandated and non-mandated populations, the largest portion of expenditures went for services that are residential and private. These include all services for children who are in foster care homes, as well as those in private boarding facilities. The next greatest portion of expenditures were spent on non-residential, private services. This category includes tuition payments for special education day schools.

Approach E: Examine available CSA services utilization records.

CPMTs are required to submit quarterly reports of the number and types of children served through the CSA. Of the 116 CPMTs, 114 have submitted at least one of these reports during their first year of operation. The reports for the fourth quarter containing cumulative data for FY 94, were due by July 31. By November 11 information had been submitted by 112 (97%) of the localities. CSA services utilization information from these CPMTs has been aggregated and analyzed. The results are presented in Table 5.

An examination of Table 5 shows that a total of 7,317 Virginia youth were provided services through the CSA pool of funds during FY 94. However, all figures in Table 5 should be viewed as "best available" data, as opposed to "hard-and-fast" numbers. One reason for this caution is that, as previously noted, all data are not yet in. Included among the non-respondents is one urban area with a sizeable number of at-risk youth served through the CSA. Moreover, many localities that submitted information provided incomplete data.

The first year of operation of the CSA has demonstrated the need for a more efficient and effective data collection and retrieval system. Most records were kept manually, transferred by paper and entered by hand onto automated spreadsheets. There were many opportunities for misinterpretation of terms by local staff and errors in calculation at all levels. This situation continues in FY 95. (About one-fifth of the CPMTs have elected to report via an automated system which greatly reduces error.)

The figures in Table 5 are lower than actual totals for FY 94, perhaps by as much as 5%. Nevertheless they provide the best estimates available, and the reported proportions of youth receiving each category of service, as demonstrated in the table, provide a credible representation of the state's first year of experience with the CSA. The data include only youth for whom pool funds have been expended. There are additional youth served through FAPTs who do not utilize CSA funds.

TABLE 5: YOUTH SERVED THROUGH CSA POOLED FUNDS -- FY 94 ¹

Service Category	Number Served
MANDATED YOUTH	
Residential Public	778
Residential Private	3,827
Non-Residential Public	453
Non-Residential Private	1,735
MANDATED TOTAL	6,793
NON-MANDATED YOUTH	
Residential Public	19
Residential Private	276
Non-Residential Public	131
Non-Residential Private	261
NON-MANDATED TOTAL	687
ALL YOUTH	
Residential Total	4,821 ²
Non-Residential Total	2,471 ²
Public Total	1,381
Private Total	6,099
STATEWIDE TOTAL	7,317 ²

¹ Based on data provided by 112 of 116 CPMTs.

² Unduplicated counts.

When Tables 3 and 5 are compared it is seen that the pattern of expenditures for FY 94 is consistent with the numbers of youth served. For example, about 93% of youth receiving pool-funded services were mandated for services through the CSA. Moreover, most mandated youth (56%) received services that are residential and private. The next greatest number of youth (26%) received services that are non-residential and private. The fewest mandated youth (7%) received non-residential, public services, and 11% received residential, public services.

Not surprisingly, care in which the child is placed out of his/her home and which is not operated by a government entity is the most expensive. Information in Tables 3 and 5 indicate that this type of service averages \$17,825 per mandated child, per year. Youth served in this category include foster care children, as well as special education youth placed in private boarding schools.

At the other end of the financial spectrum are services which are non-residential and public. Available information indicates that these services average about \$1,800 per mandated child, per year. Child care included here is typically community-based and operated by local government agencies.

The other two service categories for the mandated population fall in the middle range of costliness. Non-residential, private services cost an average of \$9,183 annually for each child. The average for residential, public child care is \$5,006 per year.

All of the figures presented above must be viewed in light of a number of influencing factors. For example, localities report anecdotally that while services for most of their at-risk children draw modest amounts from the CSA pool of funds, one or two special needs children may require very expensive private care, thus inflating the average cost per child, and requiring additional local outlays of funds (see Appendix F,4). One mid-size city related that they have one non-mandated child in a private residential setting, whose care required \$52,664 of CSA funds in FY 94.

Private service providers report that they often deal with children with multiple, serious needs. Providing quality services to meet all these needs results in expanded costs.

The aggregate figures currently collected through CSA reports are not suitable to conduct in-depth analyses. Sorting out real service costs on a case by case basis would require specific cost-benefit studies of the CSA.

Approach F: Solicit information from special education and social service administrators.

At the beginning of this study and throughout the investigative process, comments, opinions and suggestions, both solicited and unsolicited, about the CSA have been addressed to the study director. A preponderance of these comments have been negative. In an attempt to hear from a non-biased sample of knowledgeable CSA participants, administrators from Special Education

and the Department of Social Service were selected in a quasi-random manner, for in-depth phone interviews. Participants from these two fields were chosen because of their assumed familiarity with services for mandated children and with planning processes for these children. Individuals were chosen based on their membership on a FAPT, and the availability of their address and telephone number.

A total of five special education administrators, three who are FAPT chairpersons and two who are FAPT members, and three social service administrators, one who is a chairperson and two who are members, were interviewed for this study. Following is a summary of their comments.

- ☛ A director of special education, who chairs the local FAPT, discussed the positive and negative aspects of the pooling of funds. She noted that interagency collaboration is much better since the pooling of funds. More services are now available to children.

A negative point expressed by this individual is that the amount of pooled dollars is fixed and they don't have enough funds for two out-of-county residential placements. The FAPT is going to suggest that the CPMT seek an additional allocation from the Board of Supervisors (she thinks they will be successful). FAPT members are definitely becoming more aware of services in the community.

- ☛ A special education administrator, who is a FAPT chairperson for a multijurisdictional CPMT, mentioned that they have one child in a residential placement that costs \$9,000 per month. Additional funds will be needed to maintain this placement. She noted that collaboration is good among the agencies. She stated: "There is now community ownership of children's needs and problems. There is no longer agency ownership." She is very unhappy with the invoice and authorization process of funds and says it is "very time consuming for our case managers." Overall, she sees improvement in services to children.

- ☛ A special education administrator/FAPT member stated: "Things are working very well and we are having success in serving children." She expressed no problems with the pooled funds except that the amount of money is inadequate. They will have to seek a supplemental grant from the Board of Supervisors. This individual explained that at first she was "very upset" with the pool, but she has completely changed her mind. She has been able "to get assistance to children in a much quicker way." Services have been very successful. She does not think there is a need to improve the pool of funds.

- ☛ A special education administrator/FAPT member in a rural county stated the schools have greatly benefitted in getting services and resources to students. A negative aspect of the pool is that the funding is not adequate, especially for residential services. She thinks they need to be more creative in developing services at the local level.

- ☛ A special education administrator/FAPT chairperson stated that he strongly supports the CSA concept. "Virginia should be recognized for its leadership in this area. However,

it breaks down when there is no additional money to try to create local services for children. We are spending \$150,000 a year on our 18-year-old severely autistic youth who will need residential support to age 21, and will probably never return to our community. This severely depletes our financial resources."

The pooling concept is good, according to this source. It forces agencies to come together. An example: "We [the school] were serving moderately retarded youth but we could not get caretaker cooperation for services. DSS then assisted us and solved the problem." Another side benefit of the pool, as explained by this individual, is that the school staff no longer have to go alone to the board of supervisors for requesting supplemental funds. All agencies are represented in the request and present a stronger unified position. "We [the agencies] are more successful in bringing problems to the table and serving kids when additional money is not needed."

This person expressed the opinion that it is too early in the life of the CSA to form firm conclusions about its success or failure.

- ☛ A social services specialist, who chairs a FAPT, stated that pooled service funds have not been adequate. His locality suffers because of the funding formula which favors areas with high usage of service funds for children prior to the CSA's implementation. "We have two service cases this year (FY 94) that have exhausted our funds."

This source believes that the pooling of funds has facilitated access to the money. "Our FAPT is still going through growing pains." He sees the CSA as a positive move in the long run. He would like the state to reassess the funding formula because his county is at the lower end of the scale.

- ☛ A social service worker/FAPT member stated she was very frustrated because she thought there would be more in-home services for children. Instead, her team is going out of the county for services. There is no new money to start services in the county. Pooling of funds does not help because it takes funds away from the Department of Social Services. According to this source, the school system is getting most of the pooled money. She has no problem with the concept of pooling, but she feels it has caused more competition among the local agencies. This is a real problem in the management team. Also, the localities that received Trust Fund grants appear to be doing better than the others.

- ☛ A social services specialist/FAPT member from a mid-size city stated that agencies are working together more. "It is no longer a case of *your* children -- it is *our* children." She stated there are too many steps to get funding; i.e., the IFSP is developed, then the FAPT approves it, then the CPMT must approve it. This process delays the implementation of services. In this locality everything has to be approved by the CPMT. She recommended that the FAPT have an approved amount of money to spend at its own discretion.

Approach G: Elicit information from the State Management Team

In June, the State Management Team (SMT) for the CSA was asked their opinion about the usefulness of interviewing members of their *ad hoc* "non-mandated" work group, as one data-collection component of the HJR 56 study. The SMT members agreed with the idea, but they suggested that their entire membership be interviewed. Thus, at the August 18 meeting of the SMT a focus group session was conducted (see Appendix D).

Topic # 1: Adequacy of funding for non-mandated youth.

There is consensus among the SMT that the adequacy of funding for non-mandated youth continues to be a major concern. A problem exists in the very use of the terms "mandated" and "non-mandated." The distinction is artificial, for the actual needs among the two groups are often identical.

Some members predict that funding problems will increase because inflation rates usually outpace growth in public funds. These members see an immediate need for the forecasting work group to prepare to provide "hard numbers" of child service needs and costs in the near future.

It was pointed out that the CSA resulted in a redistribution of funds throughout the state. Those localities which ended up with less funds may harbor negative opinions about the entire CSA effort.

Some members of the SMT view the juvenile justice population (the "other eligible," as defined by the CSA) as long underserved. They have no advocates. Now that "286" funds are no longer available, judges in particular are frustrated with the lack of alternatives for the youth they see. Today's court cases often present more serious and more complex child and families circumstances than were encountered in past years. These situations may require more costly remedies, but the youth are competing for funds with other youth who are given higher-priority due to their "mandated" status.

The SMT is clear that the solution to the problems mentioned above is not as simple as pooling all funds for children's services with no provisions for special populations. There are legal ramifications to be considered. Federal entitlement populations have a right to bring suit if they are not provided with adequate services. Funding flexibility at the local level has its limits.

Topic # 2: Budget limitations of local governments.

Members of the SMT are fully aware that the availability of children's services is directly affected by the degree to which local funds are allocated for these services. Children who are non-mandated are especially vulnerable because under CSA regulations, services for this population are more likely to require local funding than services for mandated

children. In their attempts to conserve limited funds, decisions by local governments may have detrimental effects on certain at-risk youth and their families.

Some SMT members suggest that this problem may be resolved by 100% state funding of services to severely emotionally and behaviorally disturbed youth and their families. At a minimum, there should be a funding mechanism that does not in effect penalize localities which choose to serve their non-mandated youth. Since there is, in reality, an imposed distinction between sub-groups of the population served, the SMT should strive to develop means by which all eligible children would experience equal access to services.

The issue of differing philosophies for dealing with youthful offenders was raised. There is currently a debate at both the local and state levels which can be characterized as "punishment vs. treatment." This debate is relevant for the CSA because placements in juvenile correctional centers are fully funded by the state, while alternative, community-based services require local funds. Even though for some youthful offenders community-based services are less costly and more effective, these youth may be placed in state centers in order to preserve local funds. The SMT suggested that this issue be fully examined with a great deal of local input.

Finally, SMT members pointed out that there will "never be enough" funds for all needed services for at-risk youth and families. Other sources of funding must be aggressively pursued. Families who are able should always share in covering the costs for the services they receive. Medicaid is seen as a relatively untapped source of revenue. There are probably other resources which are not being utilized. Technical assistance should be provided to localities to aid them in seeking other resources. This effort should be supported by forecasts of children's needs in Virginia.

Topic # 3: Distribution of state pool funds.

The SMT believes that the formula developed to distribute the CSA pool of funds to localities was a bold attempt to establish equity in the allocation of state dollars. At the same time, the members recognize that it is not a perfect system. For example, localities which served a large number of youth through the old "286" program, now find themselves having to pay a greater portion of the costs for similar services under the CSA. There are definitely financial incentives for serving some categories of youth and disincentives for serving others.

Topic # 4: Community flexibility in the use of CSA funds.

The SMT reports that the CSA includes a vision that localities will be able to obtain/purchase the services needed for individual children and their families. Members state, in addition, that this flexibility is more difficult to achieve in situations where there are no discretionary service funds.

It appears to some SMT members that CPMTs are more likely to experience funding flexibility than are FAPTs, since the former typically have more control over their pooled funds. However, the flexibility of CPMTs has its limits. For example, localities are not allowed to use service funds for administrative expenses. Furthermore, they are not allowed to divert funds earmarked for mandated children to services for non-mandated children.

Objective 3: *To examine the interrelatedness of various planning processes (i.e., IFSP, IEP, FCSP) for services to mandated children.*

Approach A: Assess the levels of interagency collaboration among agencies participating in the CSA.

INTRODUCTION

To assess the nature and extent of interagency collaboration among the child-serving agencies participating in the CSA, a special study was designed as part of the overall CSA evaluation. One of the first tasks in the study was to identify a set of variables which indicate collaboration. A set of suitable variables were located in the work of Van de Ven and Ferry (1980). These variables are: Agency Awareness, Domain Consensus, Domain Similarity, Resource Dependence, Responsibility, and Satisfaction.

For the purposes of the CSA interagency collaboration study, *Agency Awareness* is defined as the extent to which the respondents are knowledgeable of other agencies' goals and services specifically related to serving at-risk youth and families. *Domain Consensus* is defined as the extent to which respondents are in agreement with other local human service agencies regarding the most important needs of at-risk youth and families and the services which should be provided to this population. *Domain Similarity* is the extent to which respondents believe they provide services to the same at-risk youth and family client population as do other agencies. *Resource Dependence* is the extent to which respondents believe their own agency is dependent upon other agencies to attain its goals in serving at-risk youth and families.

Responsibility is the extent to which respondents believe that other agencies carry out their responsibilities and commitments to clients and sister agencies. Finally, *Satisfaction* is the overall level of satisfaction that respondents express regarding their relationships with other agencies in the provision of services to at-risk youth and families.

METHODOLOGY

To measure these six constructs, a survey instrument was developed and mailed to CPMT representatives on two separate occasions. A baseline measure of collaboration was obtained for the time period prior to January 1, 1993. A follow-up measure was obtained in April 1994, as part of the greater CSA implementation survey.

Survey respondents were asked to rate other agencies for each of the survey questions using a Likert-type scale. The resultant scores were used to compute overall mean ratings of each agency for each variable. The mean ratings were then collapsed into three categories for more meaningful and concise description and discussion.

RESULTS

Respondents. There were a total of 317 respondents to the survey for the time period prior to January 1, 1993. The response rate was approximately 45%. Of the 317 CPMT members who completed a questionnaire, 27% represented departments of social services (DSS), 14% were from community services boards (CSB), 15% worked for local health departments (HD), 22% represented juvenile court service units (CSU), and 17% were from local education agencies (LEA). The remaining 5% of the respondents were private service providers. There was a marked similarity in the number and composition of respondents to the follow-up survey.

Findings. The six graphs on pages 23 and 24 depict the individual "scores" which the five participating agencies received on each of the six constructs, as measured in the study of April 1994. For example, the fifth graph portrays "responsibility" scores; that is, the extent to which survey respondents believe the "target" agency carries out its responsibilities and commitments to other agencies. It is observed that DSSs and HDs were identically rated and received the highest ratings by their fellow CPMT members. In fact, all five agencies received high ratings from at least 60% of their peers.

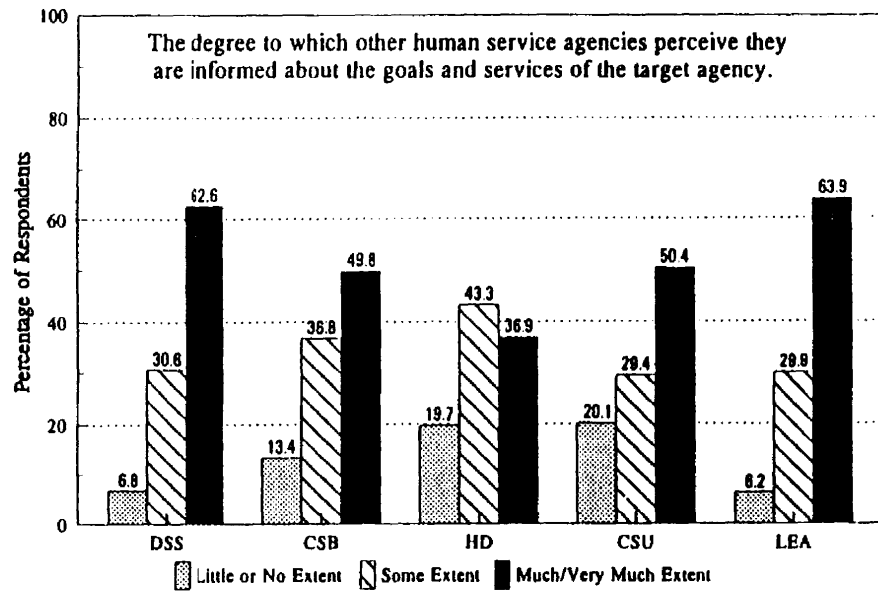
The sixth graph illustrates the same type of information for respondents' overall satisfaction with the other public agencies represented on their CPMTs. The graph indicates that the HDs received the greatest percentage (69.2%) of high satisfaction ratings, and the CSUs received the greatest percentage (14.5%) of unfavorable ratings.

Changes over time. Comparisons were made between baseline and follow-up ratings of public agencies represented on CPMTs. T-tests for significance of difference in mean ratings were conducted for the six constructs. Some differences were observed between perceptions of those surveyed for the time period prior to January 1993 and those who responded in April 1994.

One variable, Domain Consensus, showed a statistically significant increase for all five agencies. At the time of the follow-up survey, there was a significantly greater level of agreement between each participating agency and other CPMT members regarding the most important needs of at-risk youth and families and which services should be provided to this population.

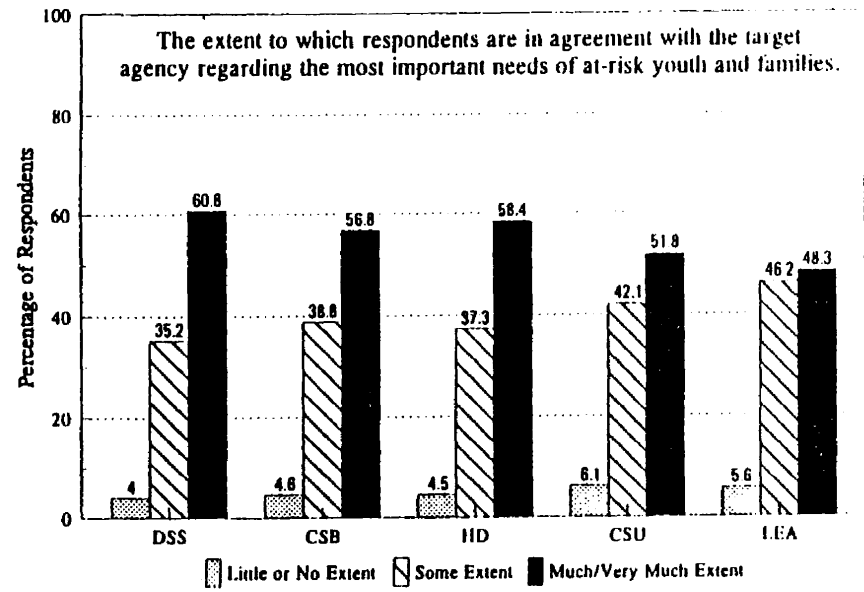
Graph 1

AGENCY AWARENESS



Graph 2

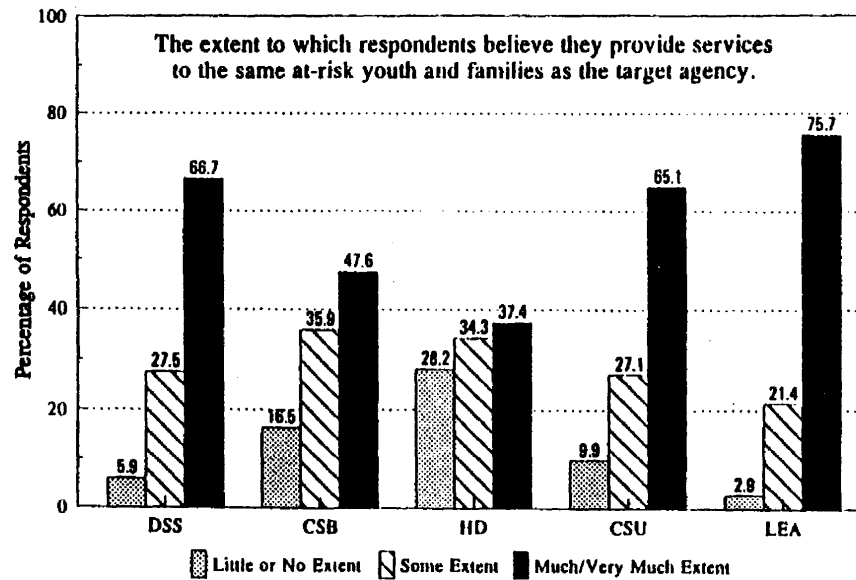
DOMAIN CONSENSUS



23

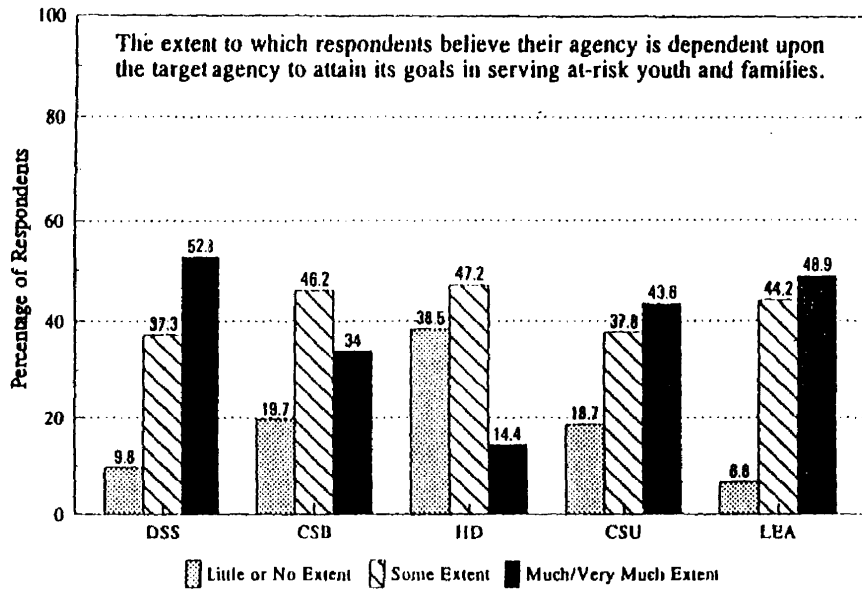
Graph 3

DOMAIN SIMILARITY



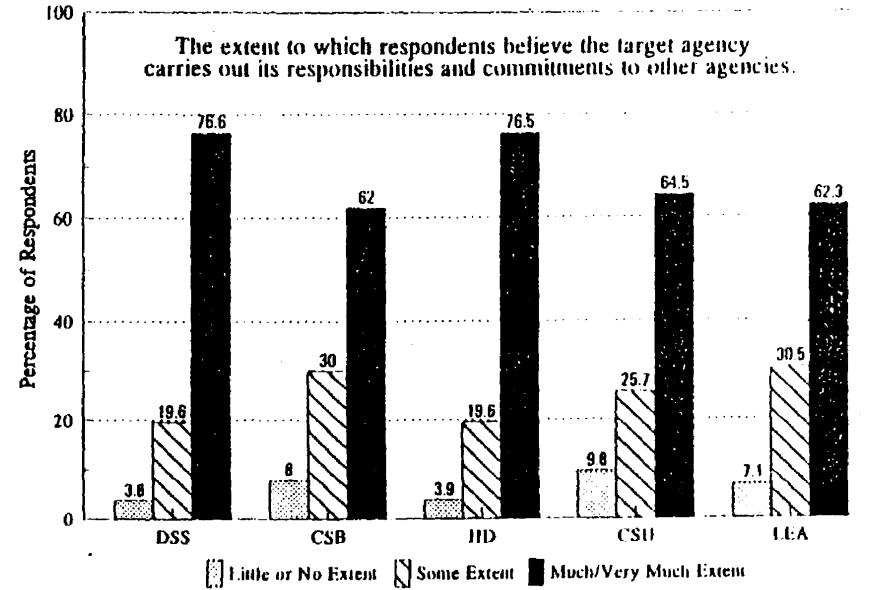
Graph 4

RESOURCE DEPENDENCE



Graph 5

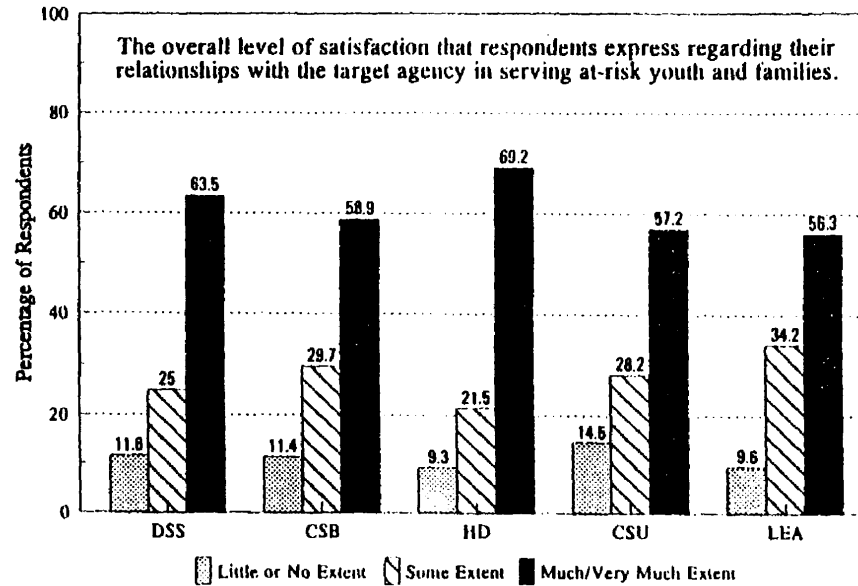
RESPONSIBILITY



24

Graph 6

SATISFACTION



For the other three variables which assess preconditions for effective collaboration, there were no significant increases observed between perceptions of those surveyed for the time period prior to January 1993 and those who responded in April 1994. These findings suggest that local agencies had already set the stage for effective collaboration prior to the inauguration of a "comprehensive" approach to services. The one area that seemed to need the most attention at the baseline observation -- and apparently received it -- was the level of agreement among agencies on the needs of at-risk youth and families and the services necessary to meet these needs.

Approach B: Gather information from intensive evaluation sites.

The July 1994 focus group session with intensive evaluation site representatives (referenced above), provided information regarding the interrelatedness of planning processes. Three child-related plans are considered in this study: the individual family service plan (IFSP) is the central case document for each CSA youth; the individual education plan (IEP) is required for every special education student; and the foster care service plan (FCSP) was universally used for all foster care children prior to the CSA.

Following are summarized comments from intensive evaluation site representatives.

- Procedures for handling multiple planning processes vary among localities. For example, policies which govern individual plans (e.g., PL 92 for FCSP), take precedence over local policies. In some localities the IFSP substitutes for other plans whenever it meets all requirements for both.
- In many localities, individual agencies present only those cases which involve children or youth with "special needs," or who are in imminent danger of out-of-home placement. In this way, the number of cases which come through the FAPT are held to a manageable level.
- There is concern for the burden that multiple planning processes may place on parents and families. FAPTs have various ways of minimizing this burden. For example, in some localities, parents are initially informed about the meetings they will have to attend in the overall planning process, so they know what to expect. In other localities, plans are merged so that parents need to attend only one meeting or one set of meetings.
- There is a general sense among intensive evaluation site staff that most problems associated with multiple planning processes have been worked out as FAPTs have moved through the initial phases of collaboration and team building. Agency staff who once struggled with "turf" issues associated with the planning and provision of services to targeted at-risk youth now see benefits to team planning. However, respondents realize that these improvements have not occurred in all localities.

Approach C: Review issues raised during the CSA Forums.

During the CSA Regional Forums, described above, the issue was raised of the interrelatedness of multiple planning processes for CSA youth. There was considerable discussion about difficulties in coordination between the FAPT and the IEP team. It was stated that FAPT members who are not school personnel generally do not fully understand all the federal regulations which control the IEP. More cross training in this area was recommended. It was also suggested that non-school FAPT members should serve on IEP teams when their presence may enhance the planning process.

With regard to other team processes, several suggestions were made for improving CPMT-FAPT relationships. These included:

- clarifying decision-making at both levels
- improving inter-team communication
- training in time management for both teams
- training in team building for both teams
- clarifying and strengthening inter-team accountability
- training for successful collaboration

Approach D: Solicit information from special education and social service administrators.

Following are comments provided during in-depth phone interviews with a randomly selected group of special education and DSS administrators who are FAPT members, as referenced above.

- ☞ Special ed./FAPT chair. If case management services were utilized correctly, duplicate planning efforts would be eliminated. The IEP and IFSP should complement one other. Coordination of these processes need more work. "This is a make or break year."
- ☞ Special ed./FAPT chair. "We don't know how to juggle the IEP and the IFSP -- which comes first?" Some FAPT members are just now learning about the FCSP and DSS requirements. Parents might be overwhelmed by all the plans. Parents need to know who is responsible. IEP team members are invited to FAPT meetings, so both plans can be developed at the same time. Case managers play a very important role in dove-tailing all these efforts.
- ☞ Special ed./FAPT member. Her only concern is the extra paperwork. Members sit in the meetings until all the plans are done. There is some duplication, but she is used to it.
- ☞ Special ed./FAPT member. Her team has coordinated, not duplicated the development and use of plans. She finds that the plans are extremely helpful to the children and their

families. It is a very time-consuming process for the FAPT. Some members still want to use "the old ways of doing things."

Generally, the FAPT has worked well together and is a good team. It has provided her with good referral resources. The CSA is a very positive experience for her.

- ☞ Special ed./FAPT chair. The various plans are not duplicative. Agencies have not stepped on each other's planning processes. There is no major problem.

One FAPT session is not sufficient for developing a child's service plan. "We can't solve a child's problems in one meeting." He would like to know what an ideal FAPT meeting should look like. "Can the state show us good models of a FAPT"?

"We have really helped some kids, especially in finding local living arrangements. Compared to the CSA, the previous way of doing things is no longer an option."

- ☞ DSS/FAPT chair. The IFSP is a replacement for the foster care plan. The IEP is brought in to help build the IFSP. The plans are more supportive than not of each other. FAPT members are still learning about each other's organizations and processes. Improvement on this will continue as part of an overall planning process.

It is helpful to have all players in one spot and fill in gaps of service. "This is a positive process. Right now it is a nightmare for the case managers. They are not able to devote enough time to their cases. It is time consuming; it is still too new, and there is turnover. Members still have to do their own job." Overall, the intent of the CSA is good.

- ☞ DSS/FAPT member. The plans are a duplication. It is not feasible to consolidate them. She is "scared to death" if the paperwork is not done correctly on the foster care plan because of the "Feds."

"The CSA has set foster care back five years. CSA causes a lot of confusion. CSA is a total failure. Nothing wrong with the previous system. It was brought on too quickly. Localities needed time to organize. Why fix what is not broke?"

"The CSA benefits school kids and the education system. It is benefitting kids in school by keeping them in school. This is the best thing to come out of the CSA."

- ☞ DSS/FAPT member. The IFSP and the foster care plan are now the same: "It is great!" The IEP does not duplicate; it requires more detail. The plans enhance each other.

The state does not realize how much demand and time FAPT members have to spend to make the CSA work. Overall, it has improved relationships among agencies.

Approach E: Consult the State Management Team's "education issues" study.

In late spring 1994, the SMT identified a list of education issues related to the CSA. They also proposed methods to study and address each issue. Certain responsibilities were assigned to the special education mandate work group. This group was charged with:

Clarification of the special education mandate (services vs. population; child vs. family; IEP vs. IFSP services; educational vs. non-education [medical, etc.]; services in lieu of residential), supplanting (to include relationship of regional special education programs).

It was recommended that the work group meet with a stakeholder group of at least 10 persons to provide input. The work group was requested to report on the results of their efforts in fall 1994.

A briefing on special education was provided to the State Executive Council on October 21, 1994 (see Appendix I). The work group reported that the CSA expands local capacity to serve youth by providing more options for placing students in the "least restrictive environment." Moreover, communities are given the authority to make decisions regarding the integration of IEP and CSA teams. Some local arrangements include:

- One FAPT member sits on the IEP team
- Joint meetings of the two teams
- FAPT meetings follow IEP meetings
- The IEP team meets in isolation

The work group's meeting with stakeholders revealed both positive and negative aspects of the relationship between special education planning and the CSA process.

Characteristics of the systems that are working well:

- A relationship of trust has developed among all members of the CPMT.
- Some special education directors have trained fellow CPMT members.
- Team members remain focused on the needs of the youth and families.
- Educators focus on service needs of children, as well as on educational needs.

Characteristics of the systems that may be working poorly:

- In some localities educators develop all IEPs in isolation of the FAPT.
- In some instances funds are re-segregated at the local level.
- Some local teams make decisions by voting rather than by consensus.

Finally, the special education mandate work group members pointed out a good resource on the issue of IEP-IFSP relatedness. The March 1994 issue of *Comprehensive Services for Youth and*

Families NEWS contains an article entitled, "Effective Integration of the IEP and the IFSP." This article provides an excellent summary of the issues involved and some resolutions that have been tested (see Appendix E).

CONCLUSIONS AND RECOMMENDATIONS

Based on the findings discussed above, the following conclusions are made, together with consequent recommendations. They are categorized according to the three objectives of this study.

I. Administrative Costs

- Many local agency staff persons experience a significant increase in their workload due to the interagency collaborative style introduced through the CSA. Some localities are responding by providing personnel to act in a coordinating capacity. This is made possible in part by the availability of CSA administrative funds. Nonetheless, CSA administration has proven to be burdensome for some of the local agencies.

Recommendations:

1. Continue funding of CSA administrative costs at least two years beyond the current biennium, for a total of the first five years of CSA operation. Closely monitor the level of burden reported by local agencies.
2. Conduct a special audit of a sample of rural and urban areas to ascertain the actual costs (in both dollars and human resources) of implementing the CSA. Since costs are expected to be inflated during the first year of a major program policy change, these audits should be conducted after the second year of operation of the CSA.
3. Provide technical assistance to localities which express an interest in joint ventures with neighboring localities to aid with CSA administration.
4. Conduct workshops for localities on alternative strategies for addressing CSA administrative needs without using additional state or local funds. CPMTs which have developed successful approaches should serve as resource persons for the workshops.

- Many local staff testify that CSA administrative funds are inadequate to cover actual costs.

Recommendations:

5. Investigate the feasibility of providing a minimum CSA administration allocation which is greater than the current minimum of \$5,000, and/or reducing the local administrative burden.
 6. Distribute the funds which some localities do not request to those localities which demonstrate a need for supplemental administrative resources.
 7. Establish an "initiative fund" to which localities could apply for innovative, cost-efficient approaches to services administration. (See Appendix F, 1.)
- Regardless of implementation issues, the "bottom line" for many involved with the CSA is whether the Act is creating a better system to serve at-risk children and their families.

Recommendation:

8. Focus future evaluation efforts on quality of services, client outcomes, customer satisfaction and cost efficiencies.

II. Adequacy of CSA pooled service funds

- A major concern expressed at all levels and across the state is that "non-mandated" youth do not receive the services they need.

Recommendations:

9. Explore alternative methods to assure equal access to services by all youth eligible for CSA inclusion, and project attendant costs to the state and localities.
10. Reassess the state funding formula for the CSA in light of one year's experience.
11. Establish a group of experts in the area of "creative funding." Make this group available to all CPMTs for technical assistance.
12. As recommended by the "CSA Forecasting Task Force," the Department of Planning and Budget should proceed to establish a technical forecasting work group to project the future demand for CSA services and their associated costs. This information is needed soon for long-range planning at the state and local levels.

- There are concerns voiced by some that charges for services by private providers have increased significantly since de-regulation. There is little "hard" evidence to deny or substantiate this claim.

Recommendation:

13. Request the Department of Planning and Budget to repeat its study of private provider fees, now that the CSA has been operational for over one year.

III. Interrelatedness of service planning processes

- There is a loud and clear message from across the Commonwealth that the greatest accomplishment to date of the CSA has been the initiation in some cases, and the enhancement in most cases, of interagency collaboration.

Recommendations:

14. Recognize local CSA participants for the herculean efforts they exerted to make the CSA a reality during the past year. Emphasize the strides they have made in the areas of team building, service coordination and interagency collaboration. Identify areas where further improvement is necessary and generate strategies for solutions.
15. At the appropriate time, publicize the CSA nationwide. Make known Virginia's accomplishments in the field of comprehensive services for at-risk youth and families. Acknowledge obstacles that remain and what the public servants of Virginia are doing to overcome these obstacles.

- It appears from the findings of this study that only a small minority of FAPTs continue to experience conflict among the IFSP, IEP and FCSP planning processes. It is also evident that there are many FAPTs that have developed expertise in resolving issues that may still exist among other FAPTs. It appears that familiarizing all FAPT members with the regulations of each type of plan is the best solution for problems with the planning process.

Recommendations:

16. Determine which FAPTs may be experiencing difficulties in handling the various child planning processes. Arrange for technical assistance from other FAPTs when requested.
17. Encourage FAPTs to cross train their members in the various types of child service plans.

18. Repeat the IEP/IFSP article which appeared in the March 1994 issue of *Comprehensive Services for Youth and Families NEWS*.

- There is a wide variation in the degree to which localities have successfully implemented the CSA. Certain jurisdictions may adhere to the philosophy and intentions underlying the Act, but are frustrated by difficulties in developing procedures and practices to assure its smooth operation.

Recommendation:

19. Invest more in technical assistance to localities. Set up a more formal process by which localities can access technical assistance in their particular areas of concern. Project costs for models of increased technical assistance.

CSA and the Governor's Commission on Government Reform

The present study, when conceived, had no direct relation to the work of the Governor's Commission on Government Reform. However, there are a number of principles delineated by the Health and Human Resources Committee of the Governor's Blue Ribbon Strike Force which are addressed by the Comprehensive Services Act. They are presented here to explore areas of consistency between the efforts of the Strike Force and the intentions of the CSA.

- *Consolidating similar or duplicative programs and services.*

A major aim of the CSA's interagency approach to services is to eliminate duplication of application and planning processes for at-risk youth and families, and to consolidate overlapping services.

- *Encouraging "one-stop shopping" to improve services to the public.*

The creation of FAPTs under the CSA has provided a single, multi-agency point of contact for parents of at-risk youth.

- *Co-locating offices, cross-training staff, and establishing a vehicle to require interagency cooperation.*

The establishment of CPMTs and FAPTs under the CSA has decidedly enhanced interagency collaboration. The cross-training of staff has been a "bonus" outcome of the team approach to services.

- *Requiring agencies to find innovative approaches to service delivery to promote efficiency and reduce costs.*

One of the principal goals of the CSA is to promote the development of new community-based services for at-risk youth and their families. One of the reasons for this is to avoid where possible the use of more restrictive and more expensive residential programs.

- *Reducing reliance on general fund support by establishing public/private partnerships.*

The establishment of public/private partnerships is one of the expressed goals of the CSA. The private sector is involved at all levels of planning, policy-making and implementation of the CSA.

- *Using computer technology to simplify paperwork, improve intra- and interagency communications, reduce costs and reduce time required for agencies to respond to the needs of clients.*

There was an intention for the CSA to be supported by a statewide, interagency management information system. This MIS was envisioned to not only reduce paperwork, but also reduce multiple automated records. The CSA MIS has not been developed because such a system is expensive. The idea has not been abandoned, however, and preliminary design work continues.

APPENDIX A

"HOUSE JOINT RESOLUTION NO. 56"

HJ56 Study; Comprehensive Services Act.

HOUSE JOINT RESOLUTION NO. 56

Requesting the Secretaries of Health and Human Resources, Public Safety, and Education to study and evaluate the Comprehensive Services Act.

Agreed to by the House of Delegates, March 10, 1994

Agreed to by the Senate, March 8, 1994

WHEREAS, responding to an identified need to recommend changes to the service delivery system for severely emotionally and/or behaviorally disturbed children, the Secretaries of Health and Human Resources, Public Safety, and Education formed an interagency council in 1990 which concluded that state and local expenditures on residential care would continue to increase significantly unless major policy and program changes were instituted; and

WHEREAS, over the next two years a study was conducted and preliminary findings from five demonstration projects as well as recommendations for the restructuring of the service delivery system were submitted to the Governor and General Assembly; and

WHEREAS, representatives of the Council included state and local staff in the various child-serving agencies, state and local government officials, parents, judges, public and private providers, and advocates covering the spectrum of entities which would feel the impact of such a new system; and

WHEREAS, the intent of the resulting legislation is "to create a collaborative system of services and funding that is child-centered, family-focused and community-based when addressing the strengths and needs of troubled and at-risk youths and their families" through early, least-restrictive, individually designed, and family-oriented services that cut across all service agencies; and

WHEREAS, to accomplish this, various types of assistance were created to enable localities to develop such a program, including (i) creation of interagency teams at the local and state levels, (ii) development of a state trust fund to provide venture capital for localities to create and expand community-based services, (iii) consolidation of eight categorical funding streams into a pool which is distributed to localities based on a formula, and (iv) provision of technical assistance and training to localities; and

WHEREAS, localities received various assurances with regard to maintenance of state funding, payment for unanticipated costs, and a transition process for localities to evolve into the system; and

WHEREAS, because it is a new approach to the way treatment, intervention, service delivery, and program coordination will be accomplished, there were provisions for latitude to address situations which may have been impossible to foresee and consider in the development of this program; and

WHEREAS, some localities have discovered that the Comprehensive Services Act has increased their costs for certain programs and increased their administrative duties; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Secretaries of Health and Human Resources, Public Safety, and Education be requested to study and evaluate the effectiveness and efficiency of and the adequacy of state funding for the Comprehensive Services Act. Technical assistance shall be provided by the House Appropriations Committee. All agencies of the Commonwealth shall provide assistance to the Secretaries, upon request.

The Secretaries of Health and Human Resources, Public Safety, and Education shall complete their work in time to submit their findings and recommendations to the Governor and the 1995 Session of the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents.

#NS

APPENDIX B

"SURVEY: CSA ADMINISTRATIVE COSTS"



COMMONWEALTH of VIRGINIA

DEPARTMENT OF

Mental Health, Mental Retardation and Substance Abuse Services

TIMOTHY A. KELLY, Ph. D.
COMMISSIONER

P. O. BOX 1797
RICHMOND, VA 23214
(804) 786-3921
(804) 371-8977 VOICE/TDD

MEMORANDUM

TO: CPMT Fiscal Agents
FROM: Timothy A. Kelly *JAK*
SUBJECT: CSA Local Administrative Costs
DATE: August 5, 1994

The 1994 General Assembly through House Joint Resolution 56 requested the Secretaries of Health and Human Resources, Public Safety, and Education to study and evaluate the effectiveness and efficiency of and the adequacy of state funding for the Comprehensive Services Act (CSA). The Secretaries have directed this Department to conduct the study.

One of the major issues during the first year of operations for the CSA is the sufficiency of funds to cover local administrative costs associated with implementing the Act. To examine the facts surrounding this issue we need your help to gather information.

Enclosed you will find a questionnaire which inquires about your locality's experience with CSA administrative costs during fiscal year 1994. Please complete the questionnaire and return it to the address below no later than August 19, 1994.

Thank you for your assistance and cooperation. With 100% participation from you we can be confident in the accuracy of our report to the General Assembly.

encl.

Return completed surveys to:

Albert C. Watts, Ph.D.
CSA Evaluation Manager
Madison Building, 9th Floor
P.O. Box 1797
Richmond, VA 23214

CSA ADMINISTRATIVE COSTS -- FISCAL YEAR 1994

LOCALITY: Arlington

FIPS: 013

INSTRUCTIONS:

On the first three lines below are the dollar amounts of state and local funds made available to your locality for FY 94 administrative costs associated with Comprehensive Services for Youth and Families (CSYF). The Department of Education provided these figures.

On the remaining blank lines, please report relevant figures (in whole dollars), even if the amount is "\$00". "Additional Local Funds" in Sections I and III refer to dollars expended above and beyond the required "Local Match." Thank you for providing this important information.

SECTION I: CSYF ADMINISTRATIVE FUNDS ALLOCATED, FY 94
(7/1/93 - 6/30/94)

LOCAL MATCH	\$ 10,968
STATE SHARE	13,406
SUB-TOTAL	24,374
ADDITIONAL LOCAL FUNDS (If Any)	
TOTAL A	\$

SAMPLE

**SECTION II: SOURCE OF "LOCAL MATCH" SHARE OF
CSYF ADMINISTRATIVE FUNDS, FY 94**

SOURCE	AMOUNT
LOCAL APPROPRIATION	\$
FEDERAL	
OTHER (Explain Below)	
TOTAL B*	\$

*Should equal "LOCAL MATCH" reported in Section I.

Explain "OTHER": _____

**SECTION III: SOURCE OF "ADDITIONAL LOCAL FUNDS"
(If Any) FOR CSYF ADMINISTRATION, FY 94**

SOURCE	AMOUNT
LOCAL APPROPRIATION	\$
FEDERAL	
OTHER (Explain Below)	
TOTAL C*	\$

*Should equal "ADDITIONAL LOCAL FUNDS" (If Any) in Section I.

Explain "OTHER": _____

**SECTION IV: TOTAL (STATE AND LOCAL) CSYF ADMINISTRATIVE FUNDS
EXPENDED - ACTUAL, FY 94**

EXPENSE TYPE	AMOUNT
PERSONNEL	\$
NON-PERSONNEL (OTHER THAN EQUIPMENT)	
EQUIPMENT	
PROGRAM SERVICES ¹	
TOTAL D²	\$

¹CSA policy allows localities, if they wish, to use administrative funds for direct services to eligible children and families.

²Total D ≤ Total A. In most cases Total D = Total A, but in some cases expenditures (Total D) may be less than allocations (Total A).

SECTION V: ADDITIONAL COMMENTS

If you have questions about this survey please call Joy Yeh, Director of Internal Audit (DMHMRSAS), at (804) 786-5846.

Please return completed survey by *August 19, 1994* to:

**Albert C. Watts, Ph.D.
CSA Evaluation Manager
Madison Building, 9th Floor
P. O. Box 1797
Richmond, VA 23214**

Person Completing Survey

()

Telephone

APPENDIX C
"RESPONSE TO COST SURVEY
BY
FAIRFAX-FALLS CHURCH CPMT
AND
SPOTSYLVANIA CPMT"



FAIRFAX
COUNTY

OFFICE OF THE COUNTY EXECUTIVE

12000 Government Center Parkway

Suite 552

Fairfax, Virginia 22035-0066

Telephone: (703) 324-2531 Fax: (703) 324-3956

V I R G I N I A

August 25, 1994

Albert C. Watts, Ph.D.
CSA Evaluation Manager
Madison Building, 9th floor
P.O. Box 1797
Richmond, Virginia 23214

Dear Mr. Watts:

Enclosed please find the Fairfax-Falls Church Community Policy and Management Team's completed questionnaire showing this locality's experience with CSA administrative costs during FY 1994.

These figures include personnel costs attributable to agency staff assigned to our 10 Family Assessment and Planning Teams as well as staff assigned to interagency teams formed to conduct training for staff, recruit and support parent representatives, develop and maintain policies and procedures, develop and maintain an integrated CSA-MIS, manage the integrated budget, initiate and administer new contracting procedures, and the like. Staff time was made available for these activities by taking time away from other activities. It remains to be seen whether this re-deployment of time will result in improved outcomes for children and families.

The administrative cost figures do not include the time spent by agency directors in CPMT-related meetings. During most of FY 1994, the CPMT met twice a month for four hours. Members also spent a significant amount of time on special assignments.

If you have questions, please call Mary Phelps at (703) 324-7558 or Sharon Justinian at (703) 324-7826.

Sincerely,

Verdia L. Haywood
Chair, Fairfax-Falls Church Community Policy and Management Team

encl.

cc. CPMT
Sharon Justinian
Mary Phelps

CSA ADMINISTRATIVE COSTS – FISCAL YEAR 1994

LOCALITY: Fairfax County/Fairfax City/Falls Church FIPS: 059

INSTRUCTIONS:

On the first three lines below are the dollar amounts of state and local funds made available to your locality for FY 94 administrative costs associated with Comprehensive Services for Youth and Families (CSYF). The Department of Education provided these figures.

On the remaining blank lines, please report relevant figures (in whole dollars), even if the amount is "\$00". "Additional Local Funds" in Sections I and III refer to dollars expended above and beyond the required "Local Match." Thank you for providing this important information.

SECTION I: CSYF ADMINISTRATIVE FUNDS ALLOCATED, FY 94
(7/1/93 – 6/30/94)

LOCAL MATCH	\$11,250
STATE SHARE	\$13,750
SUB-TOTAL	\$25,000
ADDITIONAL LOCAL FUNDS (If Any)	\$1,302,998
TOTAL A	\$1,327,998

SECTION II: SOURCE OF "LOCAL MATCH" SHARE OF
CSYF ADMINISTRATIVE FUNDS, FY 94

SOURCE	AMOUNT
LOCAL APPROPRIATION	\$11,250
FEDERAL	
OTHER (Explain Below)	
TOTAL B	\$11,250

* Should equal "LOCAL MATCH" reported in Section I.

Explain "OTHER":

**SECTION III: SOURCE OF "ADDITIONAL LOCAL FUNDS"
(If Any) FOR CSYF ADMINISTRATION, FY 94**

SOURCE	AMOUNT
LOCAL APPROPRIATION	\$1,302,998
FEDERAL	
OTHER (Explain Below)	
TOTAL C	\$1,302,998

* Should equal "ADDITIONAL LOCAL FUNDS" reported in Section I.

Explain "OTHER":

**SECTION IV: TOTAL (STATE AND LOCAL) CSYF ADMINISTRATIVE FUNDS
EXPENDED - ACTUAL, FY 94**

EXPENSE TYPE	AMOUNT
PERSONNEL	\$1,285,949
NON-PERSONNEL (OTHER THAN EQUIPMENT)	\$33,001
EQUIPMENT	\$9,048
PROGRAM SERVICES/1	\$0
TOTAL D/2	\$1,327,998

1/ CSA policy allows localities, if they wish, to use administrative funds for direct services to eligible children and families.

2/ Total D </= Total A. In most cases, Total D = Total A, but in some cases expenditures (Total D) may be less than allocations (Total A).

SECTION V: ADDITIONAL COMMENTS

The personnel costs are not new costs but rather redirected costs for CSA activities, e.g., FAPTs, support teams, CPMT staffing, and ongoing workgroups. State reimbursement for eligible JDR and social service positions has been factored out of the costs.

Costs are shown for: Department of Human Development, Juvenile and Domestic Relations District Court, Fairfax County Public Schools, Fairfax--Falls Church Community Services Board, Health Department, Office for Children, and Department of Community and Recreation Services.

If you have questions about this survey, please call Joy Yeh, Director of Internal Audit (DMHMRSAS), at (804) 786-5846.

Please return completed survey by August 19, 1994 to:

Albert C. Watts, Ph.D.
CSA Evaluation Manager
Madison Building, 9th Floor
P.O. Box 1797
Richmond, VA 23214

Mary Phelps and Sharon Justinian
CPMT Contacts

(703) 324-7558 and 324-7826
Telephone

Ginny McKernan
Person Completing Survey

(703) 324-7891
Telephone

CSA ADMINISTRATIVE COSTS -- FISCAL YEAR 1994

LOCALITY: Spotsylvania

FIPS: 177

INSTRUCTIONS:

On the first three lines below are the dollar amounts of state and local funds made available to your locality for FY 94 administrative costs associated with Comprehensive Services for Youth and Families (CSYF). The Department of Education provided these figures.

On the remaining blank lines, please report relevant figures (in whole dollars), even if the amount is "\$00". "Additional Local Funds" in Sections I and III refer to dollars expended above and beyond the required "Local Match." Thank you for providing this important information.

**SECTION I: CSYF ADMINISTRATIVE FUNDS ALLOCATED, FY 94
(7/1/93 - 6/30/94)**

LOCAL MATCH	\$ 3,037
STATE SHARE	3,713
SUB-TOTAL	6,750
ADDITIONAL LOCAL FUNDS (If Any)	40,000
TOTAL A	\$46,750

**SECTION II: SOURCE OF "LOCAL MATCH" SHARE OF
CSYF ADMINISTRATIVE FUNDS, FY 94**

SOURCE	AMOUNT
LOCAL APPROPRIATION	\$ 3,037
FEDERAL	0
OTHER (Explain Below)	
TOTAL B*	\$ 3,037

*Should equal "LOCAL MATCH" reported in Section I.

Explain "OTHER": N/A

APPENDIX F, 4

SHENANDOAH COUNTY

SHENANDOAH COUNTY
DEPARTMENT OF SOCIAL SERVICES

P.O. BOX 192
236 SOUTH MAIN STREET
WOODSTOCK, VIRGINIA 22664

ELLSWORTH M. EDWARDS
DIRECTOR

Telephone: (703) 459-3736
FAX (703) 459-8959



SOCIAL SERVICES BOARD

WILLIAM L. STOVER
NELSON FANSLER
KATRINA K. STROOP

To: Albert C. Watts, Ph.D.
From: Ellsworth M. Edwards, Chair, Shenandoah CPMT
Re: Increased Need for Funding
Date: November 2, 1994

This is a follow-up to our conversation Monday at Graves Mountain Lodge. As we discussed then, we have that three additional youth placed in the custody of the Shenandoah County Dept. of Social Services by the J & DR Court thus making them mandated. Prior to the implementation of the Comprehensive Youth Services Act, the needs of these youth would have been met by 286 funding. Now, they are funded through CSA, and will require an additional outlay of 35.49% in local funds. The Shenandoah County DSS spent hours seeking facilities who would accept these youth, and was finally able to place them at three different private institutions, all of whom are charging between \$300 - \$400 per day.

In order to maintain these placements, Shenandoah County would need to face an additional local funds appropriation of approximately \$100,000. I frankly am dreading going to local government with this news.

EME/jmh

APPENDIX G

"RELATED SURVEYS"

G, 1: VIRGINIA MUNICIPAL LEAGUE

July 17, 1994

TO: City Managers

FROM: Betty Long, Director of Fiscal Policy

SUBJECT: Feedback on the Comprehensive Services Act

Since its inception the Comprehensive Services Act (CSA) has been an issue of great concern and some controversy among local officials. The 1994 General Assembly passed HJR 56, which directs the Secretary of Health and Human Resources Kay James to evaluate the effectiveness of and the adequacy of funding for the CSA and report her findings to the 1995 General Assembly.

I would very much appreciate hearing about this program from your locality. Using the attached questions as a guide, please solicit comments from the appropriate individuals in your city, including the community policy and management team, fiscal agent, budget and legal staff and any other affected agencies and send them to me. I will forward your comments to the Secretary's office to ensure that there is adequate local input into this evaluation.

Please submit your comments no later than August 1, 1994. And thanks again for your patience with our numerous requests for information!

VML Survey Comprehensive Services Act

Locality: _____ *Title:* _____

Name of Respondent: _____ *Telephone:* _____

Please complete the information above and attach this cover sheet to your responses to the questions below. Return your response to Betty Long by mail (VML, P.O. Box 12164, Richmond, VA 23241) or FAX (804/343-3758) no later than **August 1, 1994**.

1. How would you generally characterize your experience to date with the Comprehensive Services Act (i.e. ease of implementation, effectiveness as a service delivery mechanism, particular successes/problems encountered, etc.)?
2. Can you provide data that compares caseloads and spending for this population of children prior to and since implementation of the CSA?
3. Have you found it necessary to request additional local funding after budgets have been approved for the fiscal year? Has City Council approved these requests?
4. Has the distinction that is made between mandated and non-mandated children created problems in your locality? If so, can you suggest a better approach than the one that is currently being used?
5. Describe your experience with the service fee directory. Is it an acceptable resource for identifying available services? How has the cost of services changed since the directory was implemented? Do you have any suggestions for improving the directory?
6. Describe the impact that administering this program has had regarding staffing requirements.
7. Have you encountered any difficulties meeting CSA's requirements regarding parental involvement in CPMT's or FAPT's? If so, please elaborate.
8. Has CSA resulted in greater availability of community-based alternatives for the children being served? If not, why not?
9. Would you say that children and their families are being served better under than the CSA than before? Please explain your answer.
10. Are there any specific issues not mentioned above that you would like to see included in an evaluation of the CSA?
11. Are there any other comments you would like to make regarding CSA that have not been addressed in the previous questions?

CSA Survey Responses August 12, 1994

Survey sent to 41 cities; 18 responses received (44 percent response rate).

1. How would you generally characterize your experience to date with the Comprehensive Services Act (i.e. ease of implementation, effectiveness as a service delivery mechanism, particular successes/problems encountered, etc.)?

- ◆ Favored this initiative but the benefits were oversold and underfunded. Rules and regs that have been developed have taken away promised flexibility. Has resulted in increased linkages but at a significant administrative cost.
- ◆ Difficult and time-consuming program to administer. Although there is cooperation on the surface, turf wars still exist. Agencies find it difficult to make decisions which do not affect them. However the plan is basically a good idea.
- ◆ Very time consuming; many problems associated with implementation, including: continued reliance on social services staff for case management, resource development is lacking, involved agencies still resist offering available resources, adversarial environment results from questioning of judgment of other professionals on team, financial issues still override clinical issues, waiting period to take a case before FAPT is too long, there's no clear procedure for accessing funds on an emergency basis, process creates a sense of powerlessness, too much paperwork, shouldn't be second-guessing of case workers, CSA process can be intimidating to professionals and family members. Has made it easier to get services for non-mandated children and residential facilities have had to improve services to stay competitive.
- ◆ Fairly easy to implement, but service delivery is more cumbersome since FAPT has to develop plan before services begin.
- ◆ Made service delivery more cumbersome since children and families must wait until teams meet. Hasn't been enough training provided by the state. Was implemented hastily and without considering concerns of local governments. Positive outcome is case consultation and review by various professionals.
- ◆ CPMT has worked well together to implement CSA. Most evident handicap is lack of personnel to complete paperwork and provide necessary coordination.
- ◆ Already had similar teams so implementation not difficult, but participation on FAPT's requires considerable time, which is the biggest problem.
- ◆ Another layer of bureaucracy, more complicated than it needed to be.
- ◆ Difficult to implement at first but now things are going more smoothly. CSA does represent an effective service delivery mechanism that is beneficial to children and their families.
- ◆ Implementation occurred with minimum difficulty because were already using interdisciplinary approach for case assessments. Most confusing was setting up fiscal procedures because there was minimal direction from the state.
- ◆ Has been a difficult start-up period regarding paperwork, development of procedures, data collection, case scheduling. Having difficulty in managing quarterly reports.

More youth are being identified for services but the resources for meeting needs haven't been developed.

- ◆ Had some difficulty initially because new requirements complicated existing consortium that was already operating in the area.
- ◆ A cumbersome process
- ◆ Required a great deal of time and effort to implement. Administrative funding is inadequate. Already had a collaborative process in place but CPMT believes that service decisions are better now than before. Still have a long way to go to develop new innovative services in community.
- ◆ Once initial "turf" issues were settled, CSA was implemented fairly smoothly. It is an effective service delivery mechanism because of the collaboration.
- ◆ Goals of reduced residential placements, more options to serve youth and families, early intervention and controlling costs have not been met. Didn't eliminate categorization of children, merely narrowed it. Training is non-existent. Administrative costs not adequately addressed. Funds available for services inadequate. Development of new services has not occurred. However there is a significant positive outcome, which is the increased cooperation and understanding between agencies.
- ◆ Already had a regional consortium similar to CSA structure. Transitioning to new structure required clarification on legal and fiscal issues.
- ◆ Has been difficult due to lack of guidelines and direction. Services are delayed due to the CPMT/FAPT process.

2. Can you provide data that compares caseloads and spending for this population of children prior to and since implementation of the CSA?

Generally the responses indicated that this information could not be provided in time frame given, but was available through the state Dept. of Education.

3. Have you found it necessary to request additional local funding after budgets have been approved for the fiscal year? Has City Council approved these requests?

- ◆ No
- ◆ No, but surrounding county did.
- ◆ Yes, but had to request additional funding in years prior to CSA also.
- ◆ Yes, and Council approved but it wasn't an easy process.
- ◆ Yes, and Council approved but it wasn't easy. Expect to spend twice as much in FY94 as they did in FY93, the year before CSA was implemented. Most significant factor has been increased services to non-mandated kids.
- ◆ No
- ◆ No, but expect to do so in 1994-95.
- ◆ Yes
- ◆ Yes. Initially requested transitional funding from the state and that was not request was not adequately met. Had to request supplemental funds which were approved by

both state and City Council. Expect to have to request supplemental funds in FY95 also. CSA is not adequately funded.

- ◆ No.
- ◆ No. Policy is not to serve non-mandated children.
- ◆ Yes. City Council approved.
- ◆ Yes.
- ◆ Yes. Council has approved.
- ◆ Yes. Council approved.
- ◆ Requested more money from state but were able to identify local match within existing appropriation.
- ◆ No
- ◆ Yes. Council has approved.

4. Has the distinction that is made between mandated and non-mandated children created problems in your locality? If so, can you suggest a better approach than the one that is currently being used?

- ◆ Distinction between mandated and non-mandated is not useful. Has resulted in bizarre rules and formula. Support elimination of the distinction.
- ◆ Yes. Loopholes need to be closed so that children don't become mandated for fiscal purposes only.
- ◆ No one is clear about the distinction between the two. Specific guidelines need to be established and adhered to. Should be a requirement for all of these cases to come before FAPT prior to recommendation to the court. Children being put in foster care category for funding purposes only.
- ◆ Hasn't been a problem to date, but if the intent is to serve non-mandated kids then money needs to be appropriated and local match decreased.
- ◆ Increases the potential for children to be mandated for foster care services. Agencies with non-mandated kids are desperate for funds to serve them.
- ◆ Have had very few referrals for non-mandated kids.
- ◆ Has not been a problem to date.
- ◆ Yes.
- ◆ Has been more of an educational process. In some ways it's the same as it was before with some kids able to access funds more readily. Has allowed for greater flexibility in choosing to access funds for some children that previously would have been unable to.
- ◆ CPMT has no problems; the court system seems to have some confusion.
- ◆ Yes. Difference between the two is blurred and subject to interpretation.
- ◆ Problem has been not having enough funds to serve non-mandated children.
- ◆ Are only funding for mandated children.
- ◆ Yes. Main problem is that projected expenditures for mandated children are so far in excess of actual allotments that referrals are discouraged. Until the program has a few years' experience and less expensive alternatives are developed, it will remain a problem.
- ◆ Not yet, but potential is there with the option of labeling a child as in need of preventive services.

- ◆ Yes. Has been a divisive issue on FAPT. Prevention of foster care has become the "catchall".
- ◆ The system would be more flexible if CPMT could prioritize non-mandated, at-risk youth from the entire initial allocation. Additional allocations could be restricted to mandated populations.
- ◆ No.

5. Describe your experience with the service fee directory. Is it an acceptable resource for identifying available services? How has the cost of services changed since the directory was implemented? Do you have any suggestions for improving the directory?

- ◆ Does not function well. Is underdesigned and undersupported. Also represents an abandonment of state role in rate-setting and control. Single jurisdictions have limited purchasing power.
- ◆ Directory is acceptable but cost of services has increased since directory implemented. Needs to be simplified and some way of controlling rates devised.
- ◆ Directory is useless because it's incomplete and inaccurate – end up calling facilities for correct charges and information. Long-distance costs associated with directory are also an issue. Also cost of services has increased.
- ◆ Difficult and expensive to use. Cost of services hasn't changed. Directory needs to be simplified. List names of residential centers will all services and cost under one menu.
- ◆ Can be helpful way to match the needs of the customer with the most appropriate provider, but directory is an expensive way to identify needed resources. Can't print info off the screen, which increases the cost of using the system. Directory doesn't guarantee that provider is licensed.
- ◆ Is helpful in locating resources but requires follow-up calls to vendors to obtain actual costs and services. Cost of services has increased.
- ◆ Have had limited experience with directory. Facilities not interested in negotiating – costs have gone up.
- ◆ Some costs are up; a few are down.
- ◆ Not sure that all private providers are aware of the directory. Directory itself is slow, has graphics that aren't necessary. Can be hard to find the information you're looking for. Cost of services has increased.
- ◆ Access is minimal due to hardware requirements. Cost of services has increased.
- ◆ Seems to identify services adequately, but cost of services seems to be going up.
- ◆ Have seen an increase in some fees.
- ◆ Fees are more expensive and providers are not willing to negotiate.
- ◆ Directory is not readily accessible on-line. Printed directory is too cumbersome. Rates have gone up as much as nine percent. Local agencies don't have time or expertise to negotiate rates. When a child is really in crisis, there is often only one provider in the state.
- ◆ Social workers find directory acceptable, but fees have increased.
- ◆ Directory is unnecessary. Costs have increased.
- ◆ Have made limited use of directory.

- ◆ It's a good idea but long-distance charges make it costly. There's no way to tell when files have been updated. Cost of services has gone up. Suggest removing the charges and requiring 30 days notice for changes.

6. Describe the impact that administering this program has had regarding staffing requirements.

- ◆ A major administrative load has not been funded, resulting in a forced refocus on administrative effort and a lessening of direct service. We created four FAPT teams which require several hours a month meeting time for representatives of participating members. This time is "taken" from direct service. Agency administrators assigned to the CPMT are required to devote many hours a month to the coordination, policy and paper work requirements of the Act and its regulatory implementation.
- ◆ Program administration has required extra staff time. Numerous meetings, training and problems have been handled with present staff. No credit is given to the DSS caseload standards for this extra work.
- ◆ CSA has greatly increased staff time. This includes members on the CPMTs, FAPTs and case managers. Many team members must also carry caseloads, so they spend their time not only serving on teams, but preparing cases for presentation to FAPTs or consortium teams. This occurs while the agency is seeing more children entering foster care and more children with serious problems that require more worker time.
- ◆ Program administration has been handled in this agency. All time is really being donated by the administering locality and the agency in which the chair is employed.
- ◆ CSA has been extremely time-consuming. Social workers spend much time preparing cases for presentation and review before the FAPT. This delays service provision to children. In one case, it took at least six weeks to complete the approval process. In addition, the director, child welfare supervisor and agency alternate representative spend a great deal of time away from the agency and their other responsibilities because of their participation on the FAPT, funding and policy management boards. Often, this time spent does not have a direct impact on meeting the needs of children and families in this locality.
- ◆ The amount of coordination and paper flow needed for this program requires additional staff and administrative structure. This has been one of the big roadblocks in making use of funds for prevention.
- ◆ As with any new program, there have been both positive and negative points. We already had similar teams in place to discuss this type of caseload, so actual implementation of teams was not difficult for our area. On the other hand, participation on teams (particularly FAPT) is an enormous time burden on staff that are already extremely overburdened. Our FAPT meets twice monthly and meetings may run from two to four or five hours, depending on the number of cases discussed. This is one of the biggest problems being experienced by implementation of the program.
- ◆ Additional staff time and additional paper work
- ◆ CSA requires a great deal of staff time both at the administrative and direct service level. The one-time allocation of administrative dollars did not adequately meet the

need. Administrative dollars are needed for localities to oversee, manage and staff the CSA.

- ◆ More time is involved with CSA due to the lengthy process of assessment and approval process. A lot of time is involved monitoring procedures and training FAPT members.
- ◆ FAPT and CPMT meetings are very time consuming for line staff and managers. Paperwork related to C-side, case management and service payments has increased work loads for line staff. Until a coordinator is hired, all functions related to FAPT scheduling, record-keeping, etc. consume management time. We will soon advertise for this part-time position.
- ◆ This program has not affected our staffing as we were already organized as a consortium.
- ◆ No additional staffing has been added. Each locality should be given enough money for a coordinator.
- ◆ CPMT and FAPT members spend considerable time in committee meetings. There is an additional layer of paperwork now. Committee chairs spend considerable time with communications and coordination.
- ◆ Additional staff time has been required.
- ◆ Staffing requirements have been met by existing personnel. Additional staffing would be local only.
- ◆ The impact of administering the program has required several extra hours of paperwork each week, including minutes and mailings for both the CPMT and FAPT, policy development, etc., staffing/meeting time, bookkeeping and statistical record-keeping. We estimate that since implementation of CSA, an average of approximately five hours a week (20-25 hours a month) staff time will be required in this locality.
- ◆ The process is extremely time consuming; work is duplicated for reporting purposes as well as FAPT and CPMT levels; takes time away from customers.

7. Have you encountered any difficulties meeting CSA's requirements regarding parental involvement in CPMT's or FAPT's? If so, please elaborate.

- ◆ We have had difficulty in getting parents to participate in the CPMT because most parents view the CPMT as irrelevant and bureaucratic. We have been more successful getting parent representatives on the FAPTs.
- ◆ Parents have not actively participated in the program. The majority of them are not particularly interested, and do not seem anxious to learn. It is very difficult to find parents who will consent to being a member. They may feel intimidated by representatives of the agencies involved.
- ◆ The CPMT has had a parent representative from the start, but finding parents to serve with FAPT has proven more difficult because of the time commitment and frequency of team meetings each month. The CPMT coordinator has worked very hard in this area, and more parents are on the FAPT teams, but it has proven difficult to keep these parents because of time requirements. Another difficulty is that most parents work and have a difficult time making the commitment to the team.
- ◆ No. Parents participate in the planning for their children.

- ◆ The FAPT team has policies and procedures in place to accommodate parental notification and participation in meetings, as well as refusal on the part of the parent to participate.
- ◆ We have been unable to keep a parent representative on the CPMT and the FAPT.
- ◆ We have not encountered difficulties in meeting the parental involvement requirements for CPMTs and FAPTs. Fortunately, the parents appointed have been very good about attending meetings and providing input.
- ◆ Yes! Can't get anyone.
- ◆ At the FAPT level, the parent of the child is present and a part of the entire process most (95 percent) of the time, and this is not a problem. However, getting parent representatives on the teams is very difficult. There is little motivation on the part of parents to serve on these teams. Educating the parent representatives is extremely time and staff intensive and then there is little commitment and follow-through on the part of the parents.
- ◆ Parental involvement has been fair. Parents seem overwhelmed by the process and reluctant to be assertive on the teams when they are out-numbered by human service professionals.
- ◆ We have not had consistency in attendance from parents, either the specific youth's parents or parent representatives. Without a coordinator position, no one has time to devote to parent development. It is rare for us to staff a case in which a parent is requesting service. Most cases are agency initiated and may require court orders to involve parents.
- ◆ Yes. It is difficult to find a parent representative who is knowledgeable of the services provided, and who is able to attend meetings. It takes them approximately six months or more to understand what is taking place at our meetings so they can be an active participant.
- ◆ Yes. Parent on CPMT does not attend regularly.
- ◆ Parental involvement as such has not been a great problem. Finding permanent parent representation for the FAPT and CPMTs has been difficult. Most members of the FAPTs and CPMTs have such crowded schedules that evening meetings are very difficult. Day time meetings are difficult for parent representatives who work.
- ◆ Yes. Our parent representative has not regularly attended the CPMT meetings. The FAPT parent representative has attended regularly. It is felt that there needs to be "alternates" in order to ensure proper representation and participation on both teams.
- ◆ Very few problems meeting requirements.
- ◆ No, not to any significant degree.
- ◆ Appearance before a five or more member FAPT or CPMT is a deterrent to parental involvement.

8. Has CSA resulted in greater availability of community-based alternatives for the children being served? If not, why not?

- ◆ We have been able to devise some very creative solutions to difficult problems and have seen greater awareness of service alternatives across agency participants. We

have not yet developed the local resources to permit broader use of less restrictive and expensive residential services.

- ◆ We use community-based alternatives - but their success cannot be determined yet. In the long run, the cost will possibly be about the same.
- ◆ There is much talk of more alternatives, but aside from more in-home service programs, resources continue to be quite limited. We have been told to develop our own resources. Other agencies' providers have not developed more resources, and the teams continue to direct us to develop and look for resources, but none have actually been added to help with the community-based process.
- ◆ No. We have no money to develop programs. There seems to be more awareness between agencies as to services available, and more referrals from one agency to another.
- ◆ No. There have not been additional programs other than Bricks and Sticks established as a result of the CSA.
- ◆ No, there has been no long-range planning nor has there been any development of prevention services. In my opinion, the CSA is seen as a funding source to continue the same services provided before CSA.
- ◆ I have not seen that CSA has resulted in greater availability of community-based alternatives for the children being served at this time. The first year has been one in which we are ironing out kinks, becoming familiar with the process, etc. We have begun to use in-home services more in hope of preventing foster care.
- ◆ No, we are too small a city to support alternatives.
- ◆ We received a demonstration grant and trust fund grant that allowed us to develop new community-based programs and alternatives for our children. The CSA has allowed us to continue and expand upon these services and programs.
- ◆ The availability of community-based alternatives for children has increased minimally. Our community was fortunate to receive CSA trust funds.
- ◆ There has not been an increase in community-based alternatives. In-home services were used prior to CSA to prevent foster care. There has been an increase in the number of competing in-home vendors. With the recent award of trust fund moneys, we will initiate an early intervention service. Our need is for local small group homes for behaviorally difficult teens in custody. While we have made this need known to the private sector, we have no money to assist in the development of this resource.
- ◆ Yes.
- ◆ No. All money is going to pay for services for foster children. No money is left for creativity.
- ◆ It has to a limited degree, but it is much too early to make a sound judgment as to whether these will be forthcoming. We need time and training to develop these services in the locality.
- ◆ Yes. Agencies have become more knowledgeable of the services offered by other agencies and have been more creative in formulating ISPs.
- ◆ Never any savings to be used to develop new services. Child specific funding limits the ability to develop new services. We have not developed any new community services.

- ◆ No. Community-based alternatives have always existed independent of CSA implementation. There may be an impact in localities' negotiating contracts with individual providers through consortium efforts, as well as providers tailoring services and fees specifically to the needs of youth as presented by the local CPMTs.
- ◆ No; community resources were being used prior to CSA.

9. Would you say that children and their families are being served better under than the CSA than before? Please explain your answer.

- ◆ Some children and families are better served because the input of other agency staff has resulted in "synergistic" solutions to their problems. For the majority of cases it has not made a difference, and instead has created additional administrative and paperwork problems. We find the majority of cases do not require the elaborate procedures required by the Act's implementation.
- ◆ We have some services which were previously not affordable or available, such as the homemakers/parent aides.
- ◆ Some families are better served, but no improvement is seen among foster care youth. The CPS and juvenile court kids get additional services, particularly in the in-home area. We have found that it is more difficult to access needed services for foster care children. In effect, there are just more hoops to go through to use very limited resources.
- ◆ There seems to be more awareness between agencies of the total problems that a specific family may be experiencing. Because of this, the agencies work more cooperatively and therefore the family is better served.
- ◆ No. Foster children have to wait for services to be approved. Court children often receive fewer services as they are often non-mandated.
- ◆ No, the best feature of CSA is the communication it has created between agencies.
- ◆ I think children and their families are being served better under CSA than before. It is good to work together as a team and have input and creative ideas from many agencies as to what services can and should be provided.
- ◆ Not much changed here.
- ◆ Philosophically, the CSA represents the way we need to serve children and their families. Children and families are being served in the community more, are being served more holistically and more collectively by the service providers. Some children and families are actually able to get funds to purchase of services that before would not have been able to. Whether the agencies and the system are able to do an adequate job of this is questionable. Agencies are forced to balance demand with limited resources (i.e., staff, time and dollars).
- ◆ As this community was previously serving families through an interdisciplinary approach, CSA has not changed the quality of service for children.
- ◆ Prior to CSA, we provided in-home services to prevent foster care. Interagency staffings identified youth known to one agency, but in need of services from another agency. DSS opened cases to prevent foster care when possible. Since CSA, DSS has not had to open all these cases. On occasion, another agency will now provide case management. More cases receive in-home service now than before CSA, but all are

considered mandated, prevention of foster care. Youth served through court services received in-home services or residential care through DYFS funding. While the numbers served were never high, only two non-mandated youth received services this year. However, some youth who were traditionally "court" youth have been interpreted as mandated under CSA. In summary, it is difficult at this time to say that families are being served "better" under CSA.

- ◆ Yes, because of coordination of effort by FAPT and CPMT members.
- ◆ No better, no worse.
- ◆ I believe they are. Turf issues are subsiding. The multi-disciplinary approach makes for sounder case work decisions, and more work is being done with entire families.
- ◆ Yes. Services can be more individualized to fit particular needs of children.
- ◆ Agency cooperation has led to more thorough assessments of families and less service fragmentation. Overall, we are better at providing services, not necessarily providing better services.
- ◆ One additional benefit is that each major service (court, mental health, health, social services and education) is sitting at the same table on behalf of each youth and family requiring services and coordinating efforts more directly under each jurisdiction's/CPMT's oversight.
- ◆ Time spent on CSA requirements (paper and meetings) takes away time spent with families; financial and support services delayed waiting for FAPT/CPMT approval.

10. Are there any specific issues not mentioned above that you would like to see included in an evaluation of the CSA?

- ◆ We believe that the evaluation should focus on the administrative structures created by State Code, the State Executive Council and the State Management Team in regulating the implementation. For example, we proposed an experiment to allow membership on the FAPT to vary with the identified needs of the family. This opportunity to "experiment" was rejected by the State management team because they said it was inconsistent with the Act and they had no authority to permit variations. The State office, although staffed with well intentioned people, has not been able to develop easy and useful data reporting schemes and has abetted the development of complex regulations. The General Assembly was not asked to, and did not address all of the changes required by State law and federal regulation which would have eliminated apparent inconsistencies in CSA applications, specifically with education and foster care. As a result, the promised "non-categorical" scheme has separate rules which do not mesh. A parent seeking a free and appropriate education is free to refuse to participate in the CPMT process, which in turn is responsible for the administration of the funds associated with the special education expenses. Several sources of State moneys allocated to targeted children, specifically those associated with State mental hospitals for children and learning centers, were not included in the pool.
- ◆ More responsibility at the State level for protecting CSAs structure from actions or inactions. Need more accountability and technical assistance.

- ◆ There are some issues that are still not mentioned that should be noted. We still shuffle kids around in shelters as community-based alternatives are still lacking and have not been improved since this Act has come about. There should be a greater use of family preservation. All kids at risk of foster care through a legal custody petition should be referred to a FAPT team first as a mandatory requirement. This is not being done in our locality, and results in children entering foster care without reasonable efforts made and without family preservation as a priority.
- ◆ The Sea Side Program that has been mandated for localities to complete is another way for supporters of the CSA to use this information to further promote the concept. This program requires so much information that it may not yield accurate results.
- ◆ The use of a FAPT is an excellent idea. The CPMT is simply a new layer of bureaucracy.
- ◆ None.
- ◆ How much would be saved if you consolidated DYFS into and with DSS?
- ◆ Liability issues surrounding the CSA need to be addressed and the impact that this has on localities.
- ◆ An evaluation needs to include an examination of expenditures prior to and after CSA including the number of placements outside the community.
- ◆ We have concerns about the new policy requiring non-custodial placements to comply with foster care requirements. It is unrealistic to expect case managers from non-DSS agencies to do their own mandated paperwork plus the foster care mandates.
- ◆ Not at this time.
- ◆ No.
- ◆ Yes. CSA needs to expand training opportunities for FAPT and CPMT members. Attendance at such training should not have to be financed out of local agency budgets as it is over and above what agencies customarily provide for their employees.
- ◆ No.
- ◆ Cross-jurisdictional issues have been left entirely to localities and inconsistencies in definitions of residency have caused problems. State executive team has been useless as both a supervising and policy making body.
- ◆ The potential cost shift to localities, particularly in the areas of education, referrals and children being forced into foster care or prevention status, in order to receive services funding, has caused a great deal of concern. Surrounding localities with a high degree to utilization have informed us that significant costs have been passed on to localities since CSA implementation. The major area of concern has been the cost of residential placements and the locality-share incurred.
- ◆ How involved are all disciplines - who and how often?

11. Are there any other comments you would like to make regarding CSA that have not been addressed in the previous questions?

- ◆ The rhetoric during the CSA formative period emphasized prevention. Funding has not been available to address prevention in a meaningful way. High cost investment in youth and families in the late stage is less effective. The study might examine and model the economic consequences of funding early intervention efforts. CSA has

brought into focus the lack of adequate resources to provide for children who "age out" into adulthood with high needs for service. While this problem is being studied as part of HJR 103, the problem needs to be considered in understanding CSA's impact.

- ◆ We do not think enough planning went into CSA prior to implementation. Our locality has always worked together, so we have done well in this respect. However, I do not think that some agencies, such as DYFS, Health, etc., have the same knowledge as DSS regarding foster care. Yet, they all have a vote on the issues presented.
- ◆ The consortium/CSA process should be used for gaps in services, not for general approval of agency decisions. It is a demeaning procedure to have to ask a group to pay foster care room and board rate as a guardian, when we are required to pay for these services. This takes extra time and should not be necessary. Our locality has elected to review all of these cases. Team members need to be trained as to what is an appropriate referral to foster care and what are appropriate procedures regarding CSA process. CSA is cumbersome and bureaucratic in nature. Time could be more effectively spent in working directly with families and developing community-based alternatives to really help with family preservation. Making agencies work together is a shotgun marriage at best, and is a travesty at worst. We have always used a multi-disciplinary team approach to staff difficult cases in our locality. This should be an option and not a mandatory requirement as a result of CSA.
- ◆ A real look should be taken at the success rate of children and the cost of providing services. More money and thought should go into preventing future problems. It is very hard to make a positive impact on children who have already formed their values and directions for their lives.
- ◆ The concept is good, but not practical. It is frustrating to hold custody of a child and be legally responsible for them, but to have little control over their treatment and the services they receive. Once the services requested are approved, the funding for the services must be approved. In the event of an emergency, there are still many obstacles to overcome in order to access money. The emphasis is placed on funding and not on ensuring that the child receives necessary services. In addition, the CSA has created a greater potential for susceptibility to litigation. Board members, agency representatives, and many agencies and professionals are not liable in situations in which they would not have been if each agency was acting alone.
- ◆ The comment made early in the implementation stage that the program would produce increased cost for localities is probably true in the long run, since most agencies see the CSA as a new funding source.
- ◆ It is still often difficult for agencies to understand the social service perspective in assuming custody and placement of children into foster care. Some have an unrealistic concept of when foster care is appropriate and feel it to be the "easy" answer to all the child's problems. This will change, hopefully, as the teams continue to work together on the cases.
- ◆ It's an idea whose time was not here. It should have been consolidatedg into one large department of human services, not just someone's pet project (kids). Next it will be old people, semi-kids, semi-old people, 17 year olds only, 18 year olds with problems, etc., etc.

- ◆ no answer
- ◆ We would prefer a lead agency be designated for the coordination of CSA within the community.
- ◆ no answer
- ◆ No.
- ◆ No.
- ◆ Yes. Our social services director was a very vocal opponent of CSA before it took effect. After the first year of operation, he believes that CSA has the potential to become the most effective service delivery system for families that has ever been available to localities. It is far too early to pass final judgment on the program. The only programmatic changes that I recommend at this juncture is a reasonable amount of funding for administrative costs.
- ◆ No.
- ◆ Early intervention is not possible due to funding restrictions and category requirements. State trust fund is grossly inadequate and favors good grant writers instead of addressing needs. Also, services developed become a local cost responsibility at some point. Parental participation in cost/co-pay needs to be addressed on a state level. For example, SSI child in residential placement for special education purposes should have SSI check committed to CPMT to offset non-educational costs. State CSA staff have been helpful.
- ◆ Some mechanism that would more clearly define parent/custodian ability to pay a share of the costs would be helpful.
 State participation in Medicaid reimbursement for line items currently not covered would also assist in covering costs that have been shifted to the local level.
 A collaborative approach between the local FAPT and the provider's treatment team could reduce length of stay in higher, more expensive levels of care, while providing more timely and appropriate re-entry into the local community and subsequent wrap-around services.
- ◆ Structure is needed in the dissemination of material such as policy guidelines, reports, and requests for information. It is my opinion that services have not been streamlined and improved; implementation of the Act appears to have created another discipline within those mentioned in the Act.

APPENDIX G, 2

VIRGINIA ASSOCIATION OF COUNTIES

facsimile message

VIRGINIA ASSOCIATION OF COUNTIES

1001 E. Broad Street, Suite LL20

Old City Hall

Richmond, VA 23219-1901

(804) 788-6652 Fax: (804) 788-0083

TO: County Administrators
FROM: Billie Lynch, Director of Technical Services
DATE: July 8, 1994
PAGES (including this page): 2

The Comprehensive Services Act continues to be an area of concern to many localities. Recently a number of counties have expressed to VACo staff and VACo's Health and Human Services Steering Committee that there are serious problems with the Act and its implementation.

The 1994 General Assembly, in HJR 56, requested the Secretary of Health and Human Resources to study and evaluate the effectiveness and efficiency of and the adequacy of state funding for the Comprehensive Services Act and report her findings to the 1995 General Assembly.

VACo's Health and Human Services Steering Committee, in order to provide the Secretary of Health and Human Resources specific, documented concerns of counties, recently requested that you be surveyed for specific problems or concerns with the Act. The Steering Committee will be discussing this Act at their next meeting during the Local Government Officials' Conference.

Would you please confer with the chairs of your local management teams, your fiscal agents, and other affected agencies and respond to the attached survey. Your responses will be documented and forwarded to the Secretary of Human Resources.

We believe this information can serve as a valuable tool as the Secretary completes her study and reports to the General Assembly.

Your response is needed no later than July 31. If you have questions, please contact me at (804) 788-6652 or (FAX) (804) 788-0083. Thank you for your assistance!

VIRGINIA ASSOCIATION OF COUNTIES
1001 E. Broad Street, Suite LL20
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SURVEY
COMPREHENSIVE SERVICES ACT

1. COUNTY:
2. PROBLEMS OR DIFFICULTIES YOUR COUNTY HAS HAD WITH THE ACT:
 - a. Have your resources been adequate for local administration of the Act?
 - b. Have the number of children you served been more or less than you projected?
 - c. Is CSA adequately funded for your locality?
 - d. Have local cash matching funds been sufficient?
 - e. Have the restrictions on funding for non-mandated children been a problem? How?
 - f. Has providing funds for transportation or child care for parent CPMT or FAPT participants been a problem?
 - g. Has scheduling meetings to accomodate parent representatives been a problem?
 - h. Has the new approach to rate setting and negotiating with providers been successful? If not, what are the issues?
 - i. Is the directory working?
 - j. Any other problem areas?
3. DO YOU FEEL THAT AT-RISK YOUTH AND THEIR FAMILIES ARE BEING SERVED BETTER WITH THIS ACT?
4. WHAT SUGGESTIONS DO YOU HAVE FOR IMPROVEMENT?
5. ANY OTHER COMMENTS?

Signature

Date

SURVEY RESULTS
COMPREHENSIVE SERVICES ACT

Virginia Association of Counties
(All 95 counties surveyed - 53 counties responded.)

QUESTION: Have your resources been adequate for local administration of the Act?

<u>Yes</u>	<u>No</u>
11	42

QUESTION: Have the number of children you served been more or less than you projected?

<u>More</u>	<u>Less</u>	<u>Approx. what we projected</u>
34	8	11

QUESTION: Is the Act adequately funded for your locality?

<u>Yes</u>	<u>No</u>
17	36

QUESTION: Have local cash matching funds been sufficient?

<u>Yes</u> *	<u>No</u>
41	9

* 24 counties indicated local funds sufficient only because the Board of Supervisors appropriated additional funds, feel that local funding will be a problem in the future.

QUESTION: Have the restrictions on funding for non-mandated children been a problem?

<u>Yes</u>	<u>No</u>
28	22

HOW?

Total funds will not meet mandated needs;
The potential exists due to lack of flexibility in providing services to these children;
All local funds have had to pay for them;
Court children are non-mandated;
Base year was not indicative of need;
Insufficient funding for the non-mandated population (6);
Non-mandated children need services also;
Court services not referring youth for CSA services because our funds were budgeted for mandated children;
FAPT members are using and threatening judicial leverage to make children FOSTER children or foster care prevention in order to shift into the mandated category;
The program would be more equitable for families and the implementation more manageable if there were no separation of mandated and non-mandated children;
We are not able to serve non-mandated children with funds exceeding 20% of our total allocation. Allowing more local flexibility for the CPMT would be helpful in this area.

There is a tendency to 'make' a child mandated in order to provide services. There is the thought in the minds of some court personnel that children should be ordered into foster care in order to get funding. The lack of sufficient non-mandated funding leaves the court feeling that 286 funding is gone forever; Referring to court-ordered placements as non-mandated is a serious misnomer. When the judge orders a placement, the county cannot ignore the court order.

QUESTION: Has providing funds for transportation or child care for parent CPMT or FAPT participants been a problem?

YES

5

NO

47

A number of counties said that staff were providing transportation at an unknown cost.

QUESTION: Has scheduling meetings to accommodate parent representatives been a problem?

YES

14

NO

36

QUESTION: Has the new approach to rate setting and negotiating with providers been successful?

YES

12

NO

31

Issues of Concern:

Limited experience;
 No different than before;
 We are limited in scope of available and affordable providers;
 Many rates are not negotiable;
 Rates charged by vendors has risen with the implementation of the Comprehensive Services Act (15);
 Several local agencies have separate contracts at lower rates than the Fee Service Directory indicated;
 Negotiating has not been permitted by providers (3);
 Not knowing in advance when rates changes will occur;
 The population needing placement and the market have not changed;
 This has been a dismal failure. Provider costs have significantly increased since implementation of CSA. No agency has the staff or resources to negotiate adequately;
 Whether we are offered the same prices as other service procurers is only a question that the private provider could answer;
 Providers rates have jumped way above what the state was going to allow; very time-consuming process to negotiate; insufficient start-up time for localities to get FY 94 contracts in place.
 We cannot get volume discounts like larger jurisdictions; there is no leverage....

QUESTION: Is the directory working?

YES

27

NO

17

UNCERTAIN

8

QUESTION: Any other problem areas?

The frequency of meetings and the intensity of the activity involved burns out parent representatives quickly;
The directory is very cumbersome and time consuming to use because of having to go back and forth between the two main menu trees;
Training and development of local sources;
Judge-ordered services are preempting FAPT;
Inadequate funding;
The current funding structure of the CSA provides incentives to cost-shift from independent school systems to the county;
With a third of the students in the town school being tuition students from surrounding localities, the question of responsibility for special educational placement for a tuition student may arise, and the county could have to pay for institutional care of a child who resides in another jurisdiction and pays tuition to the town;
One obvious inequity we see was when a child in the custody of the Social Services Dept. of another locality was placed in a foster home in our county. Upon placement here, it became necessary to change the child's educational placement to an out of school day program in Richmond. According to the CSA office and DOE policy, our County is responsible to pay for this special education placement, even though the child is in the custody of another jurisdiction. This involved 2 separate FAPT's and CPMT's and is a de facto incentive to seek placements outside one's own jurisdiction for children who need day placements for education;
The major problem is the time involved. Each FAPT and CPMT member have full time jobs, and to put the time in to do an adequate job and to ensure that parents are at the meetings requires a lot of time and thus the need for a part-time coordinator;
THE CSA has taken a tremendous amount of time for all agencies. The CPMT chair is now spending over 25% of her time on CSA related matters. Agencies are already understaffed. It is extremely difficult to continue to devote so many man-hours to CSA;
We still aren't doing anything about prevention. As far as I can determine, the Trust Fund Awards aren't going toward prevention;
Our resources for local administration have been adequate because we are using the Office for Youth to administer and coordinate the youth functions. The communication network is much better this way. But we are being criticized and written up by the Office on Youth regional representative - she doesn't think the Office on Youth should be involved this much;
Technical assistance is needed from the state on appropriate residential resources based on need. Localities are basically limited to prior experiences;
Profound time problems are impacting each of the agencies involved in CSA related activities; funding is insufficient;
The astronomical amount of paperwork and time required of people who have other full-time work load schedules;
CSA is a good approach but we really are not helping these youths;
One of the reasons for this Act was to serve youth in the community. Unfortunately, our county has no resources in the community which can serve these youth. We are now doing collectively what was being done individually and this has dramatically increased the staff time on each case. Management by committee always takes longer and the loss of time can be detrimental to the youth;
IEP process is dictating expenditure of CSA funds without opportunity of the FAPT & CPMT to explore development of creative alternatives;

Difficulty getting attendance from one mandated participant on the FAPT and CPMT, i.e., Health Dept, due to size of district;
 Very burdensome on staff, time-consuming;
 CSIDE software is not designed to meet the needs of CSa;
 There is a need for stronger parental support authority; upper middle class parents who are financially able to pay for part of the care are not willing to do so, and we have no ability to enforce payment;
 Emergency situations are more difficult to manage;
 Periodic multi-agency staffing does not respond well to emergency situations;
 Resolve the issue of funding for non-mandated children;
 For the directory, service definitions are inconsistent;
 Categorization of mandated vs/ non-mandated is artificial;
 CSA broadened the children eligible for pool funding.
 Many children not really CSA appropriate are being brought to FAPT meetings.

QUESTION: Do you feel that at-risk youth and their families are being served better with this Act?

<u>YES</u>	<u>NO</u>	<u>SAME LEVEL</u>	<u>TOO EARLY TO DETERMINE</u>
16	15	3	7

QUESTION: What suggestions do you have for improvement?

More funding needed (17);
 Training and technical assistance needed from the State (6);
 Repeal the Act and return to previous method (4);
 More caps on spending;
 Define court kids as mandated and fund adequately;
 Develop a mechanism which holds an agency responsible for securing those resources needed to provide its services. When the pool becomes everyone's money, husbanding it becomes no one's responsibility (2);
 Find a way to ensure that schools do not change IEP's and call for residential placement when they were previously maintained in the community by combined agency efforts;
 Revamp the state structure - accountability has not been adequately addressed at either the state or local level;
 The use of Medicaid dollars for expensive residential placements should be explored;
 Fine-tune the directory;
 CSA+1 Year informational workshop for fiscal agents;
 More publicity about what causes the problems with our youth., i.e., society that lacks character and has no respect for authority and widespread alcohol/drug abuse.
 Revisit the funding formula method;
 Eliminate all aspects of CSA except FAPT teams;
 State level negotiation with providers for lower rates based on multiple placements;
 Acknowledge the administrative costs and fund them;
 Remove artificial categorization of mandated vs/ non-mandated youth.
 Regardless of the intent of this bill or the success in keeping children in their local community, this legislative endeavor shows all the signs of being a cost transfer.

Overall, we are pleased with the CSA, its intention and implementation. The problem areas seem to be focused on funding. Additional funding to address the intent of the preventive nature of the CSA while preserving funding for those remaining in out of home placement; a support structure and identified oversight agency; additional administrative funding. The cost split should be 80/20 (state/local).

OTHER COMMENTS:

The Director of Social Services was a vocal opponent until it took effect. After the first year of operation, he is just as vocal in support of CSA. This he attributes to the excellent cooperation of CPMT and FAPT members. While there has yet been few wonder programs for children and families, the planning is sounder, turf issues have virtually disappeared, parents are more involved in the planning and new and innovative programs and services are beginning to emerge.

Implementation of the CSA has encouraged a feeling of ownership of the problem of serving at-risk youth and families and fostered better relationships among the serving agencies.

Too many situations were not even considered. Many localities were left not knowing what to do and no one on a state level able to answer our questions. Our county has spent over three times what we were projected to spend in original allotment of funds. The Board of Supervisors were asked to appropriate additional funds twice during this past fiscal year. Our original allocation is too low again this year. County governments are budgeting money based on letters that went out from the state that were not adjusted to reflect our spending for FY 93-94. This is causing problems for both the governing body and the agencies who compose the CSA management teams.

Go back to old system - just added paperwork.

Issues of supplanting should be studied. We are missing opportunities to save state and local funds by not optimizing local services.

A high level of commitment locally has enabled our locality to implement this act with fewer problems than have been experienced in other areas. However, we do believe that for such ambitious legislation enactment was too hurried, leaving many flaws in the design.

Basically, leave this thing alone for a few years and give it a chance to work.

The administrative financial support should be stated as a regular part of the program and not treated as an afterthought each year. These administrative costs will increase as the program expands. Once the program is stabilized, the reporting should be decreased by summary and consolidating.

Agency staff time to meet the requirements of this legislation has significantly increased the number of community meetings for staffing and planning for at-risk youth and families. Three new teams have been established in our community.

The perception is still that the CSA was another unfunded mandate. The localities are spending more money, and losing staff time. There appears to be no local flexibility. And the CPMT is not responsible to the Board of Supervisors, though they spend a significant amount of the taxpayers' money. There is also a question about the Health Department's role in the CSA.

Team concept is too time consuming in small localities where participation can be a shared effort.

Staff involvement and time management of the CSA is much more costly to local agencies than ever anticipated. Other services are being put on the back burner or delayed in order to meet with FAPT and CPMT to secure service plans and funding.

Who do we go to when we have problems with compliance?

The new demand from upper middle class families for services can lead to exclusion of some indigent clients as funds are used up.

We are still doing what we have always done. When we had an at-risk child, we met together informally and solved the problem. The law MANDATES attendance at local CPMT meetings plus two to three meetings per month, each lasting three to four hours. Before CSA, there were far fewer meetings while problems were actually solved more efficiently. It is also hard to create frugality since some agencies have no real financial interest in the situation.

We have failed to see any measureable benefit from the CSA. The one thing that is certain is that the county is spending a great deal more money than under the previous system. If the majority of communities in other parts of the state are having the same problems, then perhaps the best idea is to repeal the Act altogether and go back to the former system.

Add resource numbers to the facility names in the Service Fee Directory so agencies do not have to search additional sources for information.

The CSA requires that staff spend more time than ever before in meetings while work expectations and caseload standards have not reflected the additional time spent away from direct casework; thereby increasing staff's burden. Services for at-risk youth and their families vary from locality to locality. The Eastern Shore has a geographic disadvantage not shared by any other region in the state, and one that affects the provision of services and their associated cost.

Because of the composition of the teams consisting of various State agencies, making recommendations on Service Plans and yet have no accountability for obtaining the vast funds needed to obtain the plans. Prior to CSA, any fiscal impact could be attached to the Dept. of Social Services, Mental Health Retardation Substance Abuse Services, Youth and Family Services, etc., with children being case managed according to funding streams. Current State configuration leaves no single agency responsible for securing monies for protecting the Comprehensive Services Act's structure from actions or inactions.

So much of what the CSA is all about is still a major unknown and may be for years.

The lack of public residential treatment facilities for children with mental disabilities and behavioral problems often necessitates use of private, and sometimes out of state facilities. A better support structure is necessary to disseminate information to all departments in a coordinated and uniform fashion.

We would hope that in any evaluation of the CSA system, some effort will be made to have those doing the evaluating visit with FAPT and CPMT teams and programs in the communities around the state, especially in the small populated and rural areas. The Comprehensive Services Act can work if adequate funding is available and the participants are trained appropriately to utilize and coordinate their individual skills effectively in a team effort.

With the increasing demands for pool funds, there are not pool funds available for prevention, early intervention. The trust fund for new community resources is inadequately funded.

The CSA concept is a good one. Dealing with families in need through an interagency model makes sense. Our county had an interagency process in place before CSA. CSA has created significant administrative and fiscal issues. We can document at least \$96,000 in administrative costs directly attributable to meeting the intensive process required by CSA. The staff time taken up in these meetings has stretched existing resources; no time and energy is left for developing cost-effective community based resources.

Adequate funding for administration and services is needed, including the hiring of case managers. The amount of paperwork created with the CSA process is excessive. Case managers would help to keep track of the case records that need to be copied, distributed to and collected from the team members and others throughout the process.

Implement a grace period for transfers into a jurisdiction. Currently, when a child moves into a new jurisdiction, the receiving locality must immediately assume the cost of services under CSA. While the State, to date, has been able to provide supplemental funds, the local match outside the budget cycle can be a problem. The locality of origin should maintain the expense until the new locality has submitted its new annual budget.

Increase technical assistance, training and education in teamwork, case management and rate negotiation.

Provide State funding for starting cost-effective community based services. The astounding difference in average annual costs for residential care vs. non-residential services experienced in our county should be sufficient incentive for encouraging other community based services to be developed.

APPENDIX H
"STUDY WORK PLAN
HOUSE JOINT RESOLUTION NO. 56"

**BRIEFING
STUDY WORK PLAN
HOUSE JOINT RESOLUTION NO. 56
EVALUATION OF THE COMPREHENSIVE SERVICES ACT**

OFFICE OF RESEARCH AND EVALUATION, DMHMRSAS

Background

In order to determine the concerns underlying HJR 56, the resolution's chief patron, Delegate Alan A. Diamonstein, was contacted. Discussions with him led to substantive conversations with officials of the Newport News public school system.

Newport News public schools administrators articulated three major issues:

- They had to hire a full-time coordinator to attend to CSA activities.
- They had insufficient funds to serve non-mandated children.
- The Individual Family Service Plan (IFSP) process duplicates much of the Individual Education Plan (IEP) process.

One of the administrators recommends that special education funds be removed from the state pool of funds, in order for staff to work more efficiently; that is, with less duplication.

Discussions with administrators of the Fairfax school system revealed additional issues:

- Strained relationships between some school boards and other CSA participants.
- A perception that there are now (post-CSA) fewer funds available to serve special education students.
- Increased administrative costs, particularly new staff.

Contacts with the Virginia Municipal League informed us that there are two major issues among city and urban county officials:

- In some cases CSA administrative funds are insufficient to cover actual costs.
- There are inadequate funds to provide services to non-mandated children.

Context

Given the information above, the study directors proceeded to explore the extent to which the major issues are included in the overall CSA evaluation, which is mandated by the Appropriations Acts of 1993 and 1994. It is prudent to avoid duplication where possible by utilizing evaluation processes already in place.

It was determined that all the issues presented are addressed to some degree in the overall evaluation. These issues were raised in the 1993 CSA regional forums, so they were included in the April '94 CSA implementation survey. This survey was distributed to all CPMT members across the state and to FAPT members in the 10 intensive evaluation sites (approximately 1200 persons, total). **Additional information-gathering activities are necessary to meet the requirements of HJR 56.** These include:

- a special reporting of CSA financial records for FY 94, which will be available by mid-October from the Department of Education (the state's CSA fiscal agent).
- a survey of CSA fiscal agents statewide, to follow-up on actual administrative costs for FY 94.
- additional data collection activities with the 10 intensive evaluation sites.
- a polling of special education and social service administrators re: funding adequacy and the interrelatedness of various services planning processes.
- focus group interviews with the Special Education Mandate Work Group.
- focus group interviews with the State Management Team's ad hoc committee on funding of services for the non-mandated population.

These activities, together with relevant components of the ongoing CSA evaluation, are included in the study work plan for HJR 56. The CSA Evaluation Work Group is acting in an advisory capacity for this study. The members have reviewed the plan and provided valuable observations and suggestions.

Limitations of this Study

1. *Too soon to judge.* Major shifts in program direction are expected to be accompanied by "start-up costs." For example, it is burdensome for staff to develop and adopt new operating procedures. Staff often are required to take special training and participate in orientation sessions. They must forge new relationships with other agencies and participants. These activities no doubt are time consuming.

Feedback from those involved in implementing the CSA will likely point to increased workloads and uncertainty in decision-making. However, it is equally likely that the intensity of these findings will subside over the next few years.

2. *Is "more work" a positive or negative finding?* First of all there are no "baseline" data; that is, we do not know what workloads and work schedules were like before July 1, 1993. Therefore, we are unable to make "before-and-after" comparisons regarding the demands of the CSA process. Moreover, it is critical to know, for those whose workloads have increased, whether they are now "neglecting" former tasks that are critical to the families served.

Another issue concerns results. It is too early in the program to expect significant changes in the lives of CSA children and their families. Therefore, even if we find that the CSA is more "resource intensive" than previous service systems, we are unable to answer the critical question: "Is it worth the extra effort?"

Whether staff put in more hours or less hours as a result of the CSA, it is helpful to attach dollar amounts to those hours. To do this would require significant research given that the CSA operates across the Commonwealth, and involves all levels of staff in both the public and private sectors.

To gather reliable information about the time demands of the CSA would require a year-long study, in order to account for seasonal fluctuations. For example, special education service planning is rather inactive during the summer months.

3. *No consumer perspective.* The planned study relies primarily on information provided by professionals involved in implementing the CSA. There is little input from the children and families whose lives are affected. To truly learn the degree to which the CSA is accomplishing its mission, "case studies" of actual families are needed. These studies consist of direct observations, in-depth interviews and responses to written questions, all of which take place at intervals over a considerable period of time.

The CSA evaluation staff is currently negotiating to have case studies included in the overall CSA evaluation effort. The earliest possible results will be available in January, 1996.

**CSA EVALUATION
WORK PLAN
FOR DISCUSSION PURPOSES ONLY**

Objective # 1: To provide preliminary data on local administrative costs of implementing the CSA during fiscal year 1994.

Responsibility: Koch/Watts/Jordan

TASK	STEPS	PRIMARY RESPONSIBILITY	PRODUCT	BEGIN DATE	COMPLETION DATE
1. Review findings of the April '94 CSA implementation survey.	1.A. Ascertain CPMT and FAPT chairs' views re: sufficiency of CSA administrative funds. 1.B. Determine number and characteristics of CPMTs with staff devoted only to CSA. 1.C. Report on accommodations made to formally recognize staff's CSA work. 1.D. Tabulate self-reported hours per week devoted to CSA administrative tasks.	A. Jordan	Synopsis of survey findings	7/01/94	7/29/94

<p>2. Examine available CSA financial records.</p>	<p>2.A. Determine from John Mitchell the relevant records available at DOE.</p> <p>2.B. Determine amounts allocated to and charged against CSA administrative funds in FY 94.</p>	<p>A. Watts J. Yeh</p>	<p>Accounting of CSA expenditures for fiscal year 1994.</p>	<p>6/13/94</p>	<p>7/29/94</p>
<p>3. Ascertain local experience with adequacy of CSA administrative funds for FY 94.</p>	<p>3.A. Develop a brief questionnaire for local CSA fiscal agents.</p> <p>3.B. Field test survey instrument and have it reviewed by DOE.</p> <p>3.C. Distribute survey and record responses.</p> <p>3.D. Analyze data and interpret results.</p>	<p>A. Watts</p>	<p>Report of survey findings.</p>	<p>6/13/94</p>	<p>8/12/94</p>
<p>4. Gather information from intensive evaluation sites.</p>	<p>4.A. Review data from previous general focus group sessions.</p> <p>4.B. Conduct topic-specific focus group session.</p>	<p>A. Watts A. Jordan</p>	<p>Summary of perspectives from representative CPMTs and FAPT's</p>	<p>6/20/94</p>	<p>7/15/94</p>

**CSA EVALUATION
WORK PLAN
FOR DISCUSSION PURPOSES ONLY**

Objective # 2: To provide preliminary data on the adequacy of CSA pooled service funds for fiscal year 1994.

Responsibility: Koch/Watts/Jordan

TASK	STEPS	PRIMARY RESPONSIBILITY	PRODUCT	BEGIN DATE	COMPLETION DATE
1. Review testimony provided to the 1994 legislative session.	1.A. Request and examine information from: CSA Office, 1.B. Senate Finance Committee, 1.C. House Appropriations Committee.	A. Watts	Summary of relevant testimony	6/20/94	7/22/94
2. Review findings of the April '94 CSA implementation survey.	2.A. Ascertain perspective of CPMT and FAPT chairs re: "set aside" funds for non-mandated children; 2.B. necessity of placing children on a "waiting list."	A. Jordan	Synopsis of survey findings	7/01/94	7/29/94
3. Review issues raised during the CSA Forums.	3.A. Request Forum proceedings. 3.B. Highlight issues raised re: adequacy of state funds pool.	A. Jordan	List of issues raised by CSA participants	6/20/94	7/15/94

<p>4. Examine available CSA financial records.</p>	<p>4.A. Determine from John Mitchell the relevant records available at DOE (state fiscal agent for the CSA).</p> <p>4.B. Determine total amounts and percentages of allocations for mandated and non-mandated populations in FY 94.</p> <p>4.C. Tally supplemental requests and expenditures of these funds.</p>	<p>A. Watts J. Yeh</p>	<p>Accounting of CSA expenditures for fiscal year 1994.</p>	<p>6/13/94</p>	<p>10/15/94 (This is the earliest that financial data for FY 94 will be available from DOE.)</p>
<p>5. Examine available CSA services utilization records.</p>	<p>5.A. Determine number and types of children served through the CSA in FY 94.</p> <p>5.B. Describe children served.</p>	<p>A. Watts</p>	<p>Accounting of CSA children served in fiscal year 1994.</p>	<p>7/01/94</p>	<p>8/12/94</p>
<p>6. Gather information from special education and social service administrators re: effects of pooling funds.</p>	<p>6.A. Query administrators by phone re: adequacy of funding for children's services during FY 94.</p> <p>6.B. Categorize responses and interpret results.</p>	<p>A. Watts</p>	<p>Summary of impact of CSA on provision of services to targeted population.</p>	<p>6/20/94</p>	<p>7/14/94</p>
<p>7. Consult State Management Team's ad hoc "non-mandated" work group.</p>	<p>7.A. Gather background information from group's chairperson.</p> <p>7.B. Conduct a focus group session with the ad hoc work group.</p>	<p>R. Koch A. Watts</p>	<p>Synopsis of current findings of ad hoc "non-mandated" work group.</p>	<p>7/01/94</p>	<p>7/29/94</p>

**CSA EVALUATION
WORK PLAN
FOR DISCUSSION PURPOSES ONLY**

Objective # 3: To examine the interrelatedness of various planning processes (i.e. IESP, IEP, ECSP) for services to mandated children.

Responsibility: Koch/Watts/Jordan

TASK	STEPS	PRIMARY RESPONSIBILITY	PRODUCT	BEGIN DATE	COMPLETION DATE
1. Assess the levels of interagency coordination and collaboration among agencies participating in the CSA.	1.A. Tally baseline interagency collaboration scores. 1.B. Compare baseline scores to those after nine months of CSA operations.	T. Six	Synopsis of survey findings	7/01/94	7/29/94
2. Gather information from intensive evaluation sites.	2.A. Review data from previous general focus group sessions. 2.B. Conduct topic-specific focus group session.	A. Watts	Summary of perspectives from representative CPMTs and FAPTs	6/20/94	7/15/94
3. Review issues raised during the CSA Forums.	3.A. Request Forum proceedings. 3.B. Highlight issues raised re: CSA's relationship to special education.	A. Jordan	List of issues raised by CSA participants	6/20/94	7/15/94

APPENDIX I

**"SPECIAL EDUCATION: A BRIEFING
FOR THE STATE EXECUTIVE COUNCIL"**

PROFILE OF SPECIAL EDUCATION IN VIRGINIA

- ◆ 12 - 13% of Virginia's public school population receive special education services
 - 128,326 students in 1992-93
 - Figure 1 displays total special education population (1988 - 1993).
 - Figure 2 displays number of students by disability category.
 - Figure 3 displays number of students by age.
- ◆ 14 disability categories

Disability Category	Number of Students
Mental Retardation (MR)	12,404
Severe-Profound Disability (SPD)	1,066
Hard of Hearing and Deaf (HH & D)	1,346
Speech or Language Impaired (SLI)	31,003
Visual Disability (VD)	559
Serious Emotional Disturbance (SED)	10,661
Orthopedic Impairment and Other Health Impairment (OI & OHI)	846
Autism (Aut)	1,785
Specific Learning Disability (SLD)	60,934
Multiple Disabilities (MD)	1,361
Developmental Delay (DD)	6,564
Traumatic Brain Injury (TBI)	85

Source: IDEA Part B and ESEA, SOP, 1993

◆ Special education placements

Special Education Placement	Virginia students	Virginia percent	National percent
Regular Class	49,360	38%	31%
Resource Room	40,345	31%	38%
Separate Class	35,057	27%	25%
Public Separate School	1,597	1%	3%
Private Separate School	905	<1%	1%
Public Residential	520	<.5%	<1%
Private Residential	392	<.5%	<.5%
Homebound and Hospital	1,370	1%	<1%
Correctional	1,210	1%	NA
Parental Private Placement	1,242	1%	NA

Source: IDEA, Part B, December 1, 1993 (Virginia); December 1, 1991 (National)

- Figure 4 displays special education placements.
- The number of local school division placements in private separate schools or residential facilities has remained steady since 1990.

	No. of Priv Day	% of Spec Ed Pop	No. of Priv Resid	% of Spec Ed Pop
1993	905	.70%	392	.31%
1992	821	.67%	422	.34%
1991	750	.65%	417	.36%
1991	461	.41%	461	.42%

Source: IDEA, Part B, December 1 child count

BASIC PRINCIPLES OF SPECIAL EDUCATION

- ◆ **Special education and related services**
 - Special education is specially designed instruction to meet the unique needs of children with disabilities.
 - Related services are such developmental, corrective and other supportive services required to assist a child benefit from special education (transportation, speech-language pathology and audiology, psychological services, physical and occupational therapy, recreation, counseling, medical services for diagnostic purposes).
- ◆ **Free and Appropriate Public Education (FAPE)**
 - Special education and related services are provided at public expense and without charge to parents.
 - Provided in accordance with the student's individualized education program (IEP).
 - State education agency (state government) and local school divisions (local government) must appropriate such sums of money necessary to meet the requirements of FAPE.
- ◆ **Age of eligibility**
 - Age 2 to 22.
- ◆ **Residency**
 - Local school divisions must provide FAPE for all eligible children residing within its jurisdiction.

- ◆ Individualized Education Program (IEP)
 - Written statement for each child with a disability
 - Describes present levels of educational performance.
 - Includes annual goals and short-term instructional objectives.
 - Specifies special education and related services to be provided and extent of participation in regular education.
 - Specified needed transition services for each student no later than age 16 (agency responsibilities or linkages before the students leaves school).
 - Participants in IEP meeting
 - Representative of the local school division who is qualified to provide or supervise special education
 - Teacher(s)
 - Parents of child (and child when appropriate)
 - Others, as appropriate.

- ◆ Least Restrictive Environment
 - To the maximum extent appropriate, children with disabilities, including children in public or private institutions, are educated with children without disabilities.
 - Separate schooling occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

FUNDING SPECIAL EDUCATION

- ◆ \$571,095,129 IN 1992-93
 - \$ 51,756,579 Federal (9%)
 - \$163,288,235 State (29%)
 - \$356,050,315 Local (62%)

 - 95% public programs
 - 5% private programs (\$29,694,794)

- ◆ Per pupil expenditures (1992-93)
 - Average for students with disabilities: \$9,967
 - Average for all students: \$5,212 all students
 - Average additional for students with disabilities: \$4,755
 - Figures 5 and 6 display per pupil expenditure by disability category.

- ◆ Accessing other (non-public education) funding sources
 - Other funds may be accessed to pay for services on the IEP, as long as special education and related services are provided at no cost to parents.
 - Medicaid is most widely used non-education funding source (e.g., OT, PT, speech-language pathology).

RELATIONSHIP TO THE COMPREHENSIVE SERVICES ACT

- ◆ Expands options for meeting Least Restrictive Environment
 - Expands local capacity to serve youth.
- ◆ Communities provided with authority to make decisions regarding integration of IEP and CSA teams
 - Options:
 - One FAPT member sits on the IEP team
 - Joint meetings
 - FAPT meeting follows IEP meeting
 - IEP meeting in isolation
 - Certain assurances must be met
 - Confidentiality: parents must provide permission for release of information to FAPT
 - Special education regulations.
 - Two documents: IEP and IFSP
 - IEP addresses educational services (these must be provided at no cost to parents).
 - IFSP addresses non-educational services (there is no requirement that these be provided at no cost to parents).

◆ How is it working?

- Special Education Mandate Work Group's October 11 meeting with stakeholders.
 - Characteristics of systems that are working well:
 - * Trust relationship between all members of the CPMT.
 - * Special education director has trained CPMT members.
 - * Team members remain focused on the needs of the youth and families.
 - * Educators focus on services needed, not merely on education.
 - Characteristics of systems that may be working poorly:
 - * Educators develop all IEPs in isolation of FAPT.
 - * Money is re-segregated at local level.
 - * Decisions made by voting rather than consensus.
- CSA Implementation survey
 - 81% of CPMTs agree that "there has been a positive relationship between the CPMT and the schools."
 - CPMT members believe their own agency is dependent upon education to attain the goal of serving at-risk youth and families.

- Virginia Municipal League survey: 2 comments
 - Special education parents may refuse to participate in CPMT process, although the CPMT is responsible for funding special education expenses.
 - Recommendation that child's SSI check be committed to CPMT to offset non-educational costs.

- Virginia Association of Counties survey: 3 comments
 - Ensure schools do not change IEPs and call for residential placement when the students were previously maintained in the community by combined agency efforts.
 - The IEP process is dictating expenditure of CSA funds without opportunity for FAPT and CPMT to explore development of creative alternatives.
 - There are questions about responsibility for special education when students are placed in foster care in localities different from their locality of residence – when the child is maintained within the local school and when a more restrictive placement is required.

- Utilization Report
 - The majority of youth receiving pool-funded education services are served through the FAPT.
 - Chart from the CSA Evaluation office displays most number of youth served.

Dr. Lissa Power-deFur
Virginia Department of Education

Dr. Thomas Smith
Fluvanna County Public Schools

**YOUTH SERVED THROUGH CSA
FOURTH QUARTER, FY 94 ¹**

	Receiving Education Services ²	Total Youth in Services
Through FAPT (Pool funded and Non-pool funded)	499	2,893
Non-FAPT (Pool funded)	101	2,120
TOTAL YOUTH SERVED IN 4TH QUARTER, FY 94 ³	600	5,013

¹ Based on data provided by 107 of 116 CPMTs.

² These figures are lower than actual, due to incomplete reporting by many CPMTs.

³ Duplicated counts. There are a number of youth who received some services through the FAPT and other services in which the FAPT was not involved, both during the fourth quarter of FY 94.

Figure 1

Special Education

Total Population

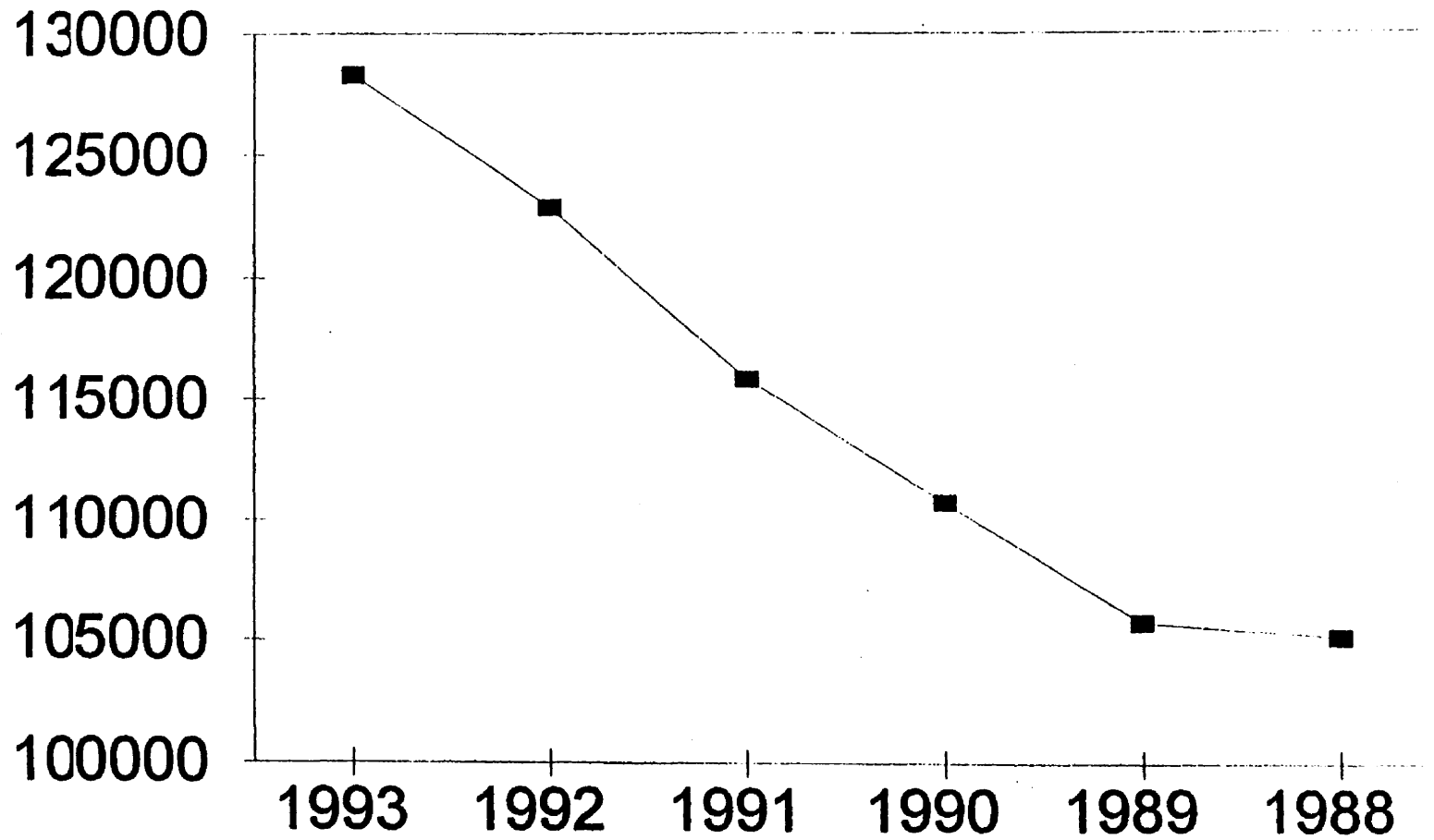


Figure 2

Special Education

Disability Categories

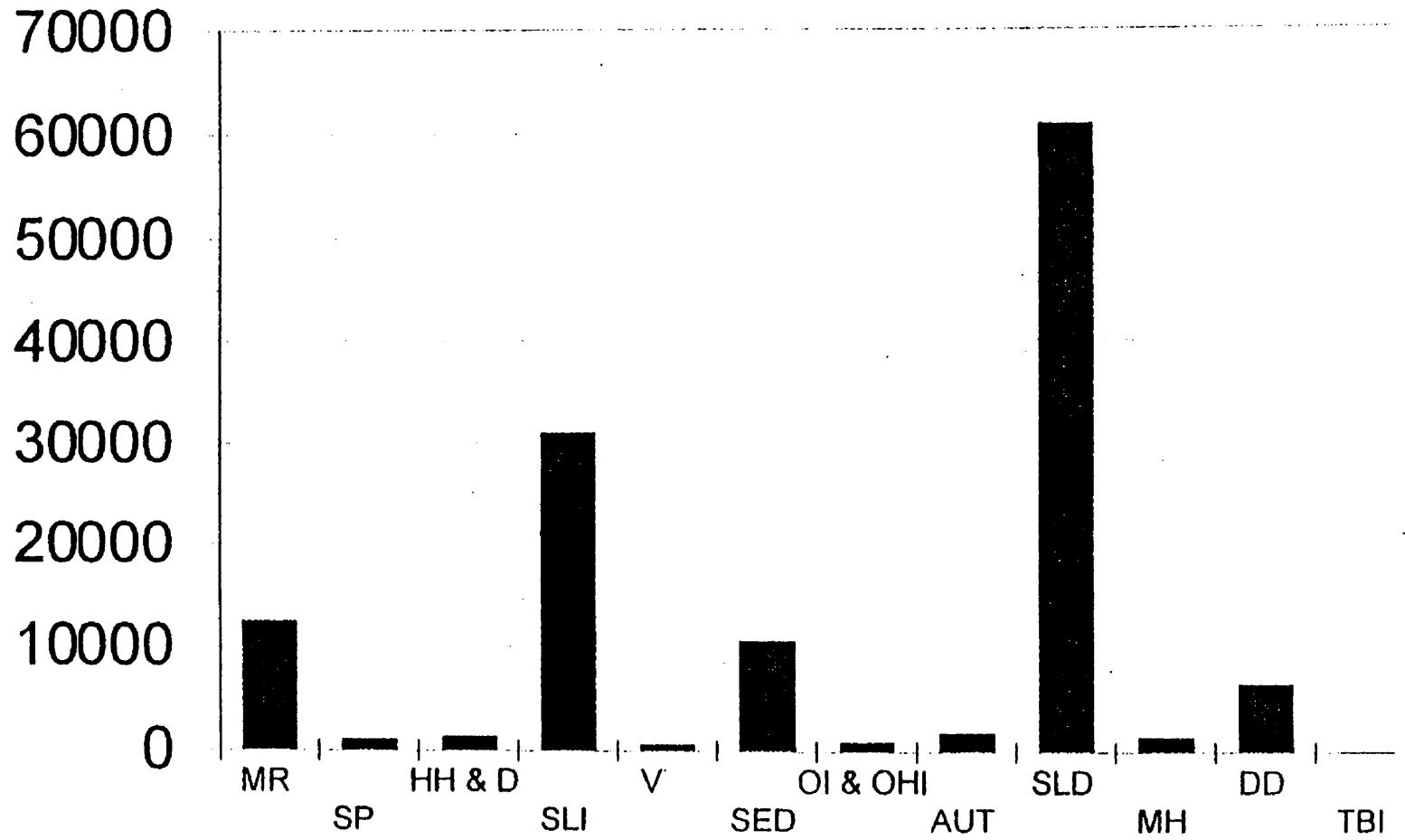


Figure 3

Special Education in Va

Student Age

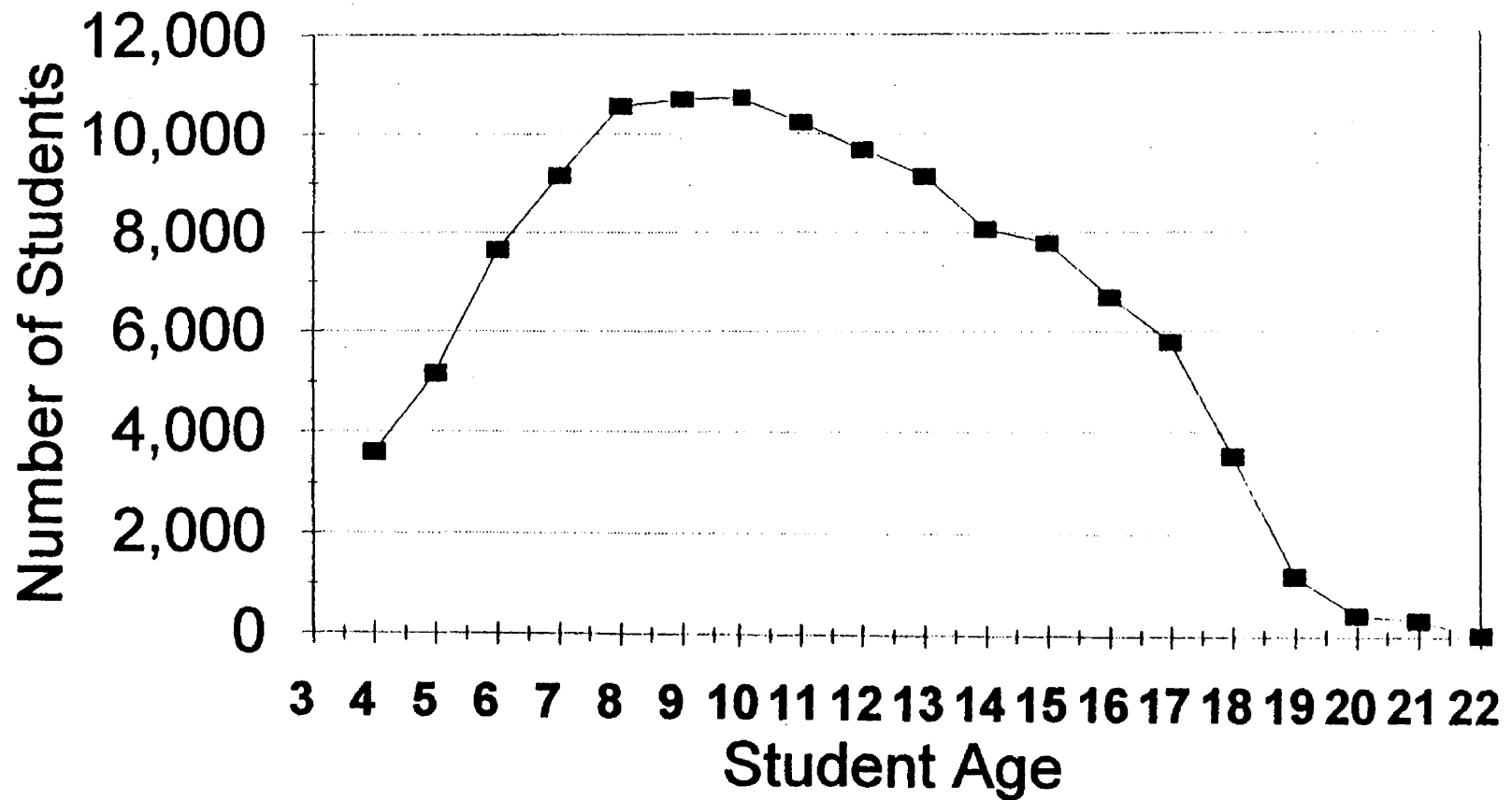


Figure 4

Special Education

Placements: 1993

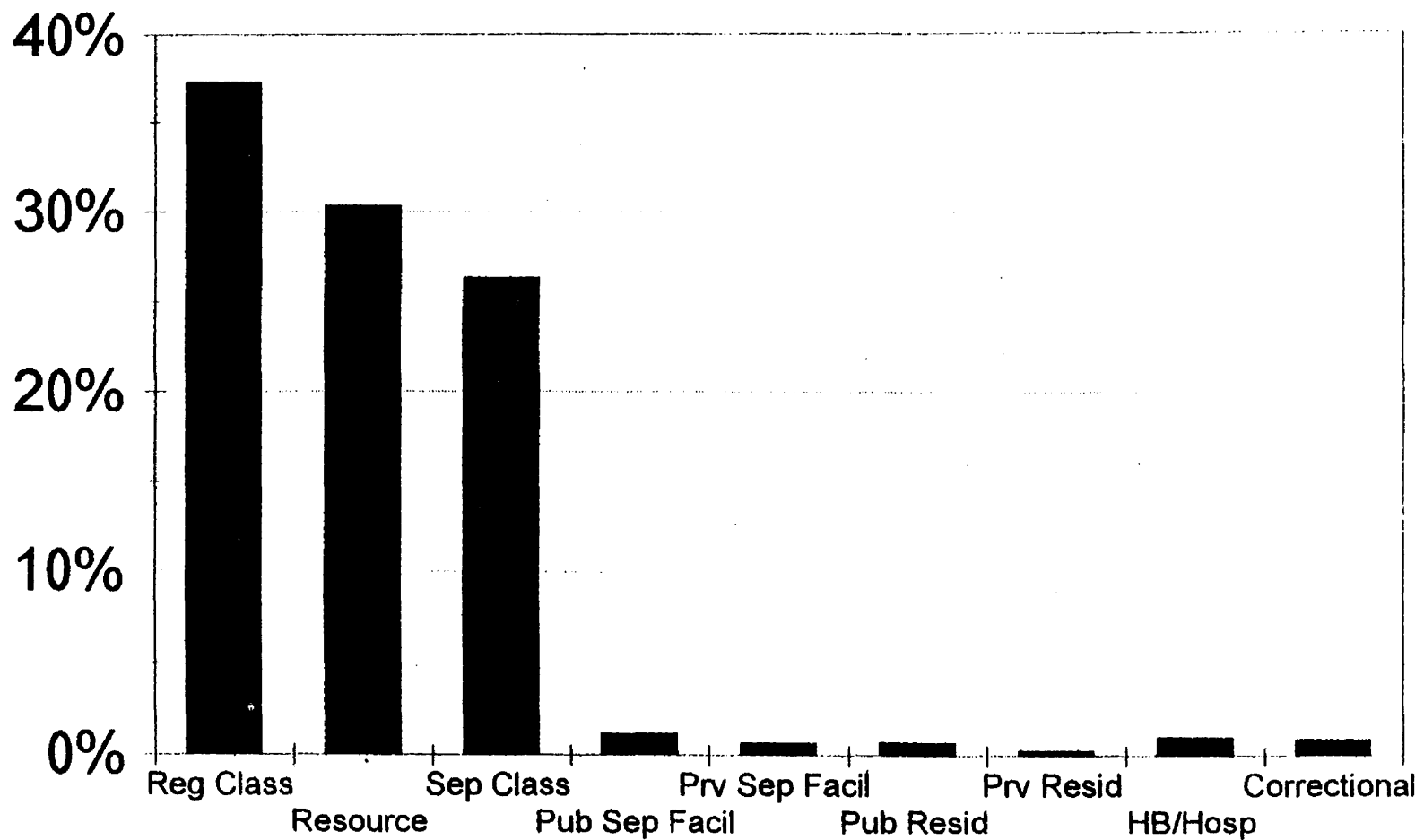


Figure 5

Special Education Per Pupil Costs

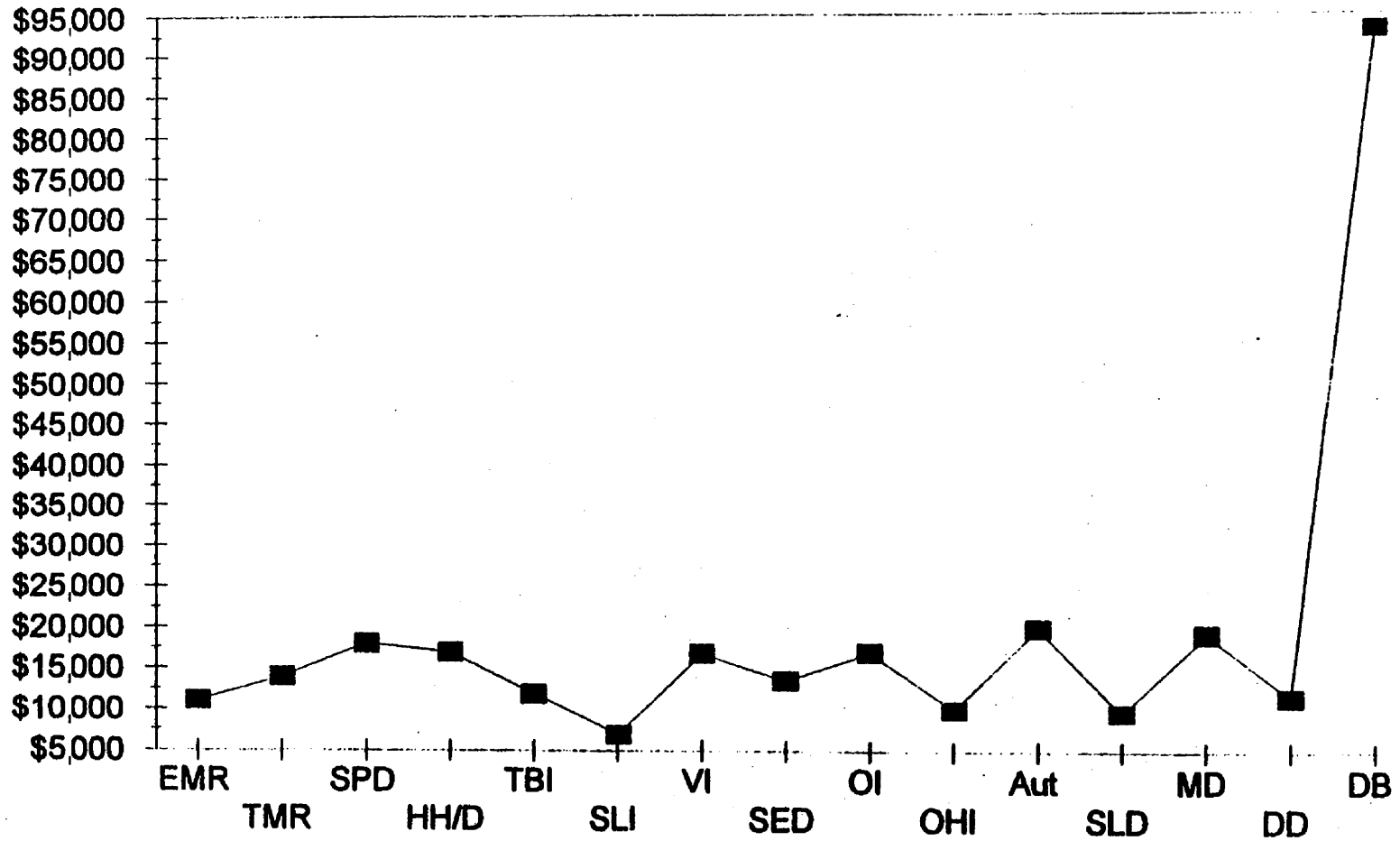


Figure 6

Special Education Per Pupil Costs

